

# Exhibit “L”

December 14, 2020

Mr. Mark Weisbart  
12770 Coit Road  
Suite 541  
Dallas, Texas 75251

Re: In re: Muhammad Siddiqi, case 19-42834

Dear Mark:

Pursuant to your request, please find the following:

1. Tax returns for the Debtor for 2015, 2016 and 2017.
2. The tax return for Hiba Entertainment in 2015 and bank statements.
3. Amended schedules with additional requested detail.
4. Car Titles
5. Proof of payments on Ford Vehicles by Debtor's brother. The brothers name is Muhammad A. Siddiqi, 3020 Big Town Blvd., Mesquite Texas 75150 Phone 214-727-7763.
6. Final Judgment in the Ropal Lawsuit.
7. Debtor's Divorce Decree.
8. Debtor cannot access his bank statement because of the freeze on the account, but we got as many as we could, and his Wife's statements are enclosed.
9. Debtor has no employment agreement with Eagle Protections Group, Inc.
10. Copy of Debtor's passport.
11. Formation documents for Eagle Protection Group, Inc.



12. Motion and Order for Contempt in Ropal Lawsuit

13. Eagle Protective Group Find Report

14. Discover Statements

15. Texas Franchise Tax

16. Cadence Bank 2018 Mortgage Interest Statement

17. Hiba 2018 Expenses

Please let me know if you need any additional information.

**1.**

**2015, 2016, 2017,  
2018 TAX RETURNS**

<b>Form 1040</b> Department of the Treasury - Internal Revenue Service (99) <b>2015</b>		OMB No. 1545-0074	IRS Use Only-Do not write or staple in this space.																																																															
For the year Jan. 1-Dec. 31, 2015, or other tax year beginning 2015, ending 20																																																																		
Your first name and initial <b>MUHAMMAD</b>		Last name <b>SIDDIQI</b>	See separate instructions.																																																															
If a joint return, spouse's first name and initial		Last name	Your social security number <b>- 2222</b>																																																															
Home address (number and street). <b>1109 LAKE STREAM DR</b>		Apt. no.	<b>▲ Make sure the SSN(s) above and on line 6c are correct.</b>  <b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse																																																															
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>PLANO TX 75075</b>		Foreign province/state/country																																																																
Foreign country name		Foreign postal code																																																																
<b>Filing Status</b> 1 <input checked="" type="checkbox"/> Single 2 <input type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. <input type="checkbox"/> 4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 5 <input type="checkbox"/> Qualifying widow(er) with dependent child																																																																		
<b>Exemptions</b> 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a b <input type="checkbox"/> Spouse c Dependents: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>(1) First name</th> <th>Last name</th> <th>(2) Dependent's social security number</th> <th>(3) Dependent's relationship to you</th> <th>(4) Chk if child under age 17 qualifying for child tax credit (see instructions)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> </tbody> </table> d Total number of exemptions claimed <b>1</b>				(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) Chk if child under age 17 qualifying for child tax credit (see instructions)					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>																																						
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<b>Income</b>  Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.  If you did not get a W-2, see instructions.		<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>7 Wages, salaries, tips, etc. Attach Form(s) W-2</td><td>7</td><td>162,198</td></tr> <tr><td>8a Taxable interest. Attach Schedule B if required</td><td>8a</td><td> </td></tr> <tr><td>b Tax-exempt interest. Do not include on line 8a</td><td>8b</td><td> </td></tr> <tr><td>9a Ordinary dividends. Attach Schedule B if required</td><td>9a</td><td> </td></tr> <tr><td>b Qualified dividends</td><td>9b</td><td> </td></tr> <tr><td>10 Taxable refunds, credits, or offsets from state and local income taxes</td><td>10</td><td> </td></tr> <tr><td>11 Alimony received</td><td>11</td><td> </td></tr> <tr><td>12 Business income or (loss). Attach Schedule C or C-EZ</td><td>12</td><td> </td></tr> <tr><td>13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/></td><td>13</td><td> </td></tr> <tr><td>14 Other gains or (losses). Attach Form 4797</td><td>14</td><td> </td></tr> <tr><td>15a IRA distributions</td><td>15a</td><td> </td></tr> <tr><td>b Taxable amount</td><td>15b</td><td> </td></tr> <tr><td>16a Pensions and annuities</td><td>16a</td><td> </td></tr> <tr><td>b Taxable amount</td><td>16b</td><td> </td></tr> <tr><td>17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E</td><td>17</td><td> </td></tr> <tr><td>18 Farm income or (loss). Attach Schedule F</td><td>18</td><td> </td></tr> <tr><td>19 Unemployment compensation</td><td>19</td><td> </td></tr> <tr><td>20a Social security benefits</td><td>20a</td><td> </td></tr> <tr><td>b Taxable amount</td><td>20b</td><td> </td></tr> <tr><td>21 Other income</td><td>21</td><td> </td></tr> <tr><td>22 Combine the amounts in the far right column for lines 7 through 21. This is your total income</td><td>22</td><td>162,198</td></tr> </table>		7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	162,198	8a Taxable interest. Attach Schedule B if required	8a		b Tax-exempt interest. Do not include on line 8a	8b		9a Ordinary dividends. Attach Schedule B if required	9a		b Qualified dividends	9b		10 Taxable refunds, credits, or offsets from state and local income taxes	10		11 Alimony received	11		12 Business income or (loss). Attach Schedule C or C-EZ	12		13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13		14 Other gains or (losses). Attach Form 4797	14		15a IRA distributions	15a		b Taxable amount	15b		16a Pensions and annuities	16a		b Taxable amount	16b		17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17		18 Farm income or (loss). Attach Schedule F	18		19 Unemployment compensation	19		20a Social security benefits	20a		b Taxable amount	20b		21 Other income	21		22 Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	162,198
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Form 1040 (2015) MUHAMMAD SIDDIQI

-2222 Page 2

<b>Tax and Credits</b>	38	Amount from line 37 (adjusted gross income)	38	162,198
	39a	Check <input type="checkbox"/> You were born before January 2, 1951, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes checked <input type="checkbox"/> 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
<b>Standard Deduction for -</b>	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	12,153
• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38	41	150,045
• All others:	42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instructions	42	4,000
Single or Married filing separately, \$6,300	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	146,045
Married filing jointly or Qualifying widow(er), \$12,600	44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	33,964
Head of household, \$9,250	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Excess advance premium tax credit repayment. Attach Form 8962	46	
	47	Add lines 44, 45, and 46	47	33,964
	48	Foreign tax credit. Attach Form 1116 if required	48	
	49	Credit for child and dependent care expenses. Attach Form 2441	49	
	50	Education credits from Form 8863, line 19	50	
	51	Retirement savings contributions credit. Attach Form 8880	51	
	52	Child tax credit. Attach Schedule 8812, if required	52	
	53	Residential energy credit. Attach Form 5695	53	
	54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
	55	Add lines 48 through 54. These are your total credits	55	
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	33,964
<b>Other Taxes</b>	57	Self-employment tax. Attach Schedule SE	57	
	58	Unreported social security and Medicare tax from Form: <input type="checkbox"/> 1097 b <input type="checkbox"/> 8919	58	
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
	60a	Household employment taxes from Schedule H	60a	
	60b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
	61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	
	62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> instructions; enter code(s)	62	
	63	Add lines 56 through 62. This is your total tax	63	33,964
<b>Payments</b>	64	Federal income tax withheld from Forms W-2 and 1099	64	34,011
	65	2015 estimated tax payments and amount applied from 2014 return	65	6,000
	66a	Earned income credit (EIC)	66a	
	b	Nontaxable combat pay election <input type="checkbox"/> 66b		
	67	Additional child tax credit. Attach Schedule 8812	67	
	68	American opportunity credit from Form 8863, line 8	68	
	69	Net premium tax credit. Attach Form 8962	69	
	70	Amount paid with request for extension to file	70	
	71	Excess social security and tier 1 RRTA tax withheld	71	2,138
	72	Credit for federal taxes on fuels. Attach Form 4136	72	
	73	Credits from Form: a <input type="checkbox"/> 8879 b <input type="checkbox"/> 8878 c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
	74	Add lines 64, 65, 66a, 67, 68, 69, 70, 71, 72, and 73. These are your total payments	74	42,149
<b>Refund</b>	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	8,185
	76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	8,185
Direct deposit? See instructions.		Routing number <input type="checkbox"/> Account number <input type="checkbox"/> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	77	Amount of line 75 you want applied to your 2016 estimated tax	77	
<b>Amount You Owe</b>	78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
	79	Estimated tax penalty (see instructions)	79	
<b>Third Party Designee</b>	Do you want to allow another person to discuss this return with the IRS (see instructions)? <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No			
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Joint return? See instructions. Keep a copy for your records.	41931	06-22-2016	SECURITY SUPERVISOR	Daytime phone number
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	Identity Protection PIN (see inst.)
<b>Paid Preparer Use Only</b>	Preparer's signature	Date	Check <input checked="" type="checkbox"/> self-employed <input type="checkbox"/> PTIN	
	R S Easley	06-22-2016	P00117468	
	Print/Type preparer's name	R S Easley		
	Firm's name	TAX FILING Services	Firm's EIN	75-1914530
	Firm's address	736 N Main		
	Duncanville, TX 75116		Phone no.	972-298-2161

**SCHEDULE A  
(Form 1040)**

**Itemized Deductions**

OMB No. 1545-0074

**2015**  
Attachment  
Sequence No. **07**

Department of the Treasury  
Internal Revenue Service (99)

► Information about Schedule A and its separate instructions is at [www.irs.gov/schedulea](http://www.irs.gov/schedulea).  
► Attach to Form 1040.

Name(s) shown on Form 1040

Your social security number

**MUHAMMAD SIDDIQI**

**- 2222**

<b>Medical and Dental Expenses</b>	Caution. Do not include expenses reimbursed or paid by others.		
1	Medical and dental expenses (see instructions)	1	
2	Enter amount from Form 1040, line 38 <b>2</b>	2	
3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1951, multiply line 2 by 7.5% (.075) instead	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	
<b>Taxes You Paid</b>	5 State and local (check only one box):	5	1,211
	a <input type="checkbox"/> Income taxes, or		
	b <input checked="" type="checkbox"/> General sales taxes	6	5,601
6	Real estate taxes (see instructions)	7	
7	Personal property taxes	8	
8	Other taxes. List type and amount ►	9	6,812
9	Add lines 5 through 8		
<b>Interest You Paid</b>	10 Home mortgage interest and points reported to you on Form 1098	10	5,341
	11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	11	
Note. Your mortgage interest deduction may be limited (see instructions).	12 Points not reported to you on Form 1098. See instructions for special rules	12	
	13 Mortgage insurance premiums (see instructions)	13	
	14 Investment interest. Attach Form 4952 if required. (See instructions.)	14	
	15 Add lines 10 through 14	15	5,341
<b>Gifts to Charity</b>	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	
If you made a gift and got a benefit for it, see instructions.	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283, over \$500	17	
	18 Carryover from prior year	18	
	19 Add lines 16 through 18	19	
<b>Casualty and Theft Losses</b>	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instr.)	21	
	22 Tax preparation fees	22	91
	23 Other expenses - investment, safe deposit box, etc. List type and amount ►	23	
	24 Add lines 21 through 23	24	91
	25 Enter amount from Form 1040, line 38 <b>25</b> <b>162,198</b>	25	
	26 Multiply line 25 by 2% (.02)	26	3,244
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	0
<b>Other Miscellaneous Deductions</b>	28 Other - from list in instructions. List type and amount ►	28	
<b>Total Itemized Deductions</b>	29 Is Form 1040, line 38, over \$154,950?	29	12,153
	<input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.		
	<input checked="" type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.		
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>		

For Paperwork Reduction Act Notice, see Form 1040 instructions.

EEA

Schedule A (Form 1040) 2015

**SCHEDULE E  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at [www.irs.gov/schedulee](http://www.irs.gov/schedulee).

OMB No. 1545-0074

**2015**

Attachment  
Sequence No **13**

**MUHAMMAD SIDDIQI**

Your social security number

**-2222**

**Part I** Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

**A** Did you make any payments in 2015 that would require you to file Form(s) 1099? ☐ Yes ☒ No

**B** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☒ No

**1a** Physical address of each property (street, city, state, ZIP code)

**A** 3114 CARSON CT ROWLETT TX 75088

**B**

**C**

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1		60	0	<input type="checkbox"/>
<b>B</b>					<input type="checkbox"/>
<b>C</b>					<input type="checkbox"/>

**Type of Property:**

1 Single Family Residence

3 Vacation/Short-Term Rental

5 Land

7 Self-Rental

2 Multi-Family Residence

4 Commercial

6 Royalties

8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received	3	1,434		
4 Royalties received	4			
<b>Expenses:</b>				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9	1,778		
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14	929		
15 Supplies	15	3,451		
16 Taxes	16	2,279		
17 Utilities	17			
18 Depreciation expense or depletion	18	5,196		
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20	13,633		
21 Subtract line 20 from line 3 (rents) and line 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6199	21	(12,199)		
22 Deductible rental real estate losses after limitation, if any, on Form 8582 (see instructions)	22			
<b>23a</b> Total of all amounts reported on line 3 for all rental properties	<b>23a</b>	1,434		
<b>b</b> Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>			
<b>c</b> Total of all amounts reported on line 12 for all properties	<b>23c</b>			
<b>d</b> Total of all amounts reported on line 18 for all properties	<b>23d</b>	5,196		
<b>e</b> Total of all amounts reported on line 20 for all properties	<b>23e</b>	13,633		
<b>24</b> Income. Add positive amounts shown on line 21. Do not include any losses	<b>24</b>		0	
<b>25</b> Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>		0	
<b>26</b> Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>		0	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2015

EEA

Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No. 1545-0172

**2015**

Attachment  
Sequence No. **179**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562).

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**MUHAMMAD SIDDIQI**

**RENTAL HOUSE**

**-2222**

## **Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

## **Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

## **Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

### **Section A**

17	MACRS deductions for assets placed in service in the years beginning before 2015	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

### **Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential real property	01-2015	149,100	27.5 yrs.	MM	S/L	5,196
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

### **Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

## **Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	5,196
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2015)

EEA

Form **8582**

# **Passive Activity Loss Limitations**

OMB No. 1545-1008

Department of the Treasury  
Internal Revenue Service (99)

► See separate instructions.  
► Attach to Form 1040 or Form 1041.

**2015**

Attachment  
Sequence No. **88**

Name(s) shown on return

► Information about Form 8582 and its instructions is available at [www.irs.gov/form8582](http://www.irs.gov/form8582).

Identifying number

**MUHAMMAD SIDDIQI**

**-2222**

## **Part I 2015 Passive Activity Loss**

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)

<b>1a</b> Activities with net income (enter the amount from Worksheet 1, column (a))	<b>1a</b>	
<b>b</b> Activities with net loss (enter the amount from Worksheet 1, column (b))	<b>1b</b>	( 12,199 )
<b>c</b> Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	<b>1c</b>	( )
<b>d</b> Combine lines 1a, 1b, and 1c	<b>1d</b>	(12,199)

## **Commercial Revitalization Deductions From Rental Real Estate Activities**

<b>2a</b> Commercial revitalization deductions from Worksheet 2, column (a)	<b>2a</b>	( )
<b>b</b> Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	<b>2b</b>	( )
<b>c</b> Add lines 2a and 2b	<b>2c</b>	( )

## **All Other Passive Activities**

<b>3a</b> Activities with net income (enter the amount from Worksheet 3, column (a))	<b>3a</b>	( )
<b>b</b> Activities with net loss (enter the amount from Worksheet 3, column (b))	<b>3b</b>	( )
<b>c</b> Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	<b>3c</b>	( )
<b>d</b> Combine lines 3a, 3b, and 3c	<b>3d</b>	( )

<b>4</b> Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior years unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules that you used. If line 4 is a loss and: • Line 1d is a loss, go to Part II. • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.	<b>4</b>	(12,199)
--	----------	----------

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

## **Part II Special Allowance for Rental Real Estate Activities With Active Participation**

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

<b>5</b> Enter the smaller of the loss on line 4 or the loss on line 4	<b>5</b>	12,199
<b>6</b> Enter \$150,000. If married filing separately, see instructions	<b>6</b>	150,000
<b>7</b> Enter modified adjusted gross income, but not less than zero (see inst.) Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	<b>7</b>	162,198
<b>8</b> Subtract line 7 from line 6	<b>8</b>	( )
<b>9</b> Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions	<b>9</b>	( )
<b>10</b> Enter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.	<b>10</b>	0

## **Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

<b>11</b> Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	<b>11</b>	( )
<b>12</b> Enter the loss from line 4	<b>12</b>	( )
<b>13</b> Reduce line 12 by the amount on line 10	<b>13</b>	( )
<b>14</b> Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	<b>14</b>	( )

## **Part IV Total Losses Allowed**

<b>15</b> Add the income, if any, on lines 1a and 3a and enter the total	<b>15</b>	( )
<b>16</b> Total losses allowed from all passive activities for 2015. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	<b>16</b>	0

For Paperwork Reduction Act Notice, see instructions.

Form 8582 (2015)

EEA



Form **8879**

**IRS e-file Signature Authorization**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

▶ Do not send to the IRS. This is not a tax return.  
▶ Keep this form for your records.  
▶ Information about Form 8879 and its instructions is at [www.irs.gov/form8879](http://www.irs.gov/form8879).

**2015**

Submission Identification Number (SID) ▶

Taxpayer's name

**MUHAMMAD SIDDIQI**

Social security number

**2222**

Spouse's name

Spouse's social security number

**Part I Tax Return Information - Tax Year Ending December 31, 2015** (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	162,198
2	Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12)	2	33,964
3	Federal income tax withheld (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7)	3	34,011
4	Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a)	4	8,185
5	Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14)	5	

**Part II Taxpayer Declaration and Signature Authorization** (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2015, and to the best of my knowledge and belief, it is true, correct, and complete. I declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt, (b) a notice of rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account designated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To receive (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

RTN=11100061 ACC=1596921773

☒ I authorize **TAX FILING Services**

ERO firm name

to enter or generate my PIN **41931**

as my signature on my tax year 2015 electronically filed income tax return.

Enter five digits, but do not enter all zeros

☐ I will enter my PIN as my signature on my tax year 2015 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶

Date ▶ **06-22-2016**

Spouse's PIN: check one box only

☐ I authorize

ERO firm name

to enter or generate my PIN

as my signature on my tax year 2015 electronically filed income tax return.

Enter five digits, but do not enter all zeros

☐ I will enter my PIN as my signature on my tax year 2015 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶

Date ▶

**Practitioner PIN Method Returns Only - continue below**

**Part III Certification and Authentication - Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

**753303-00002**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2015 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Publication 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ **R S Easley**

Date ▶ **06-22-2016**

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see your tax return instructions.

EEA

Form 8879 (2015)

1040

Overflow Statement

2015  
Page 1

Name(s) as shown on return

MUHAMMAD SIDDIQI

Your Social Security Number

2222

SCHEDULE E, LINE 14 - REPAIRS

Description

PAINT

Amount

CLEANING AND MAINT

\$ 500

429

Total:

\$ 929

Client Copy



Excess Social Security - Nonrailroad Employees Worksheet - 1040, Line 71 (Keep for your records)		2015
Name <b>MUHAMMAD SIDDIQI</b>	SSN [REDACTED]	-2222
If you are filing a joint return, you must figure any excess tax withheld separately for each spouse. DO NOT combine amount of both husband and wife.		
1. Add all social security tax withheld (but not more than \$7,347.00 for each employer). This tax should be shown in box 4 of your Forms W-2. Enter the total here	1.	9,485
2. Enter any uncollected social security tax on tips or group-term life insurance included in the total on Form 1040, line 62	2.	
3. Add lines 1 and 2. If \$7,347.00 or less, stop here. You cannot claim the credit	3.	9,485
4. Social security limit	4.	\$7,347.00
5. Excess. Subtract line 4 from line 3	5.	2,138

Client Copy

# Estimated Tax Worksheet for Next Year

2015

Name(s) as shown on return

MUHAMMAD SIDDIQI

Your social security number

-2222

1. Wages	1.	
2. Interest and Dividend income	2.	
3. Capital gain income	3.	
4. Taxable IRA/Pension income	4.	
5. Taxable Social Security income	5.	
6. Business income	6.	
7. Other income	7.	
8. Total income (add lines 1 thru 7)	8.	
9. Adjustments to income	9.	
10. Adjusted gross income (subtract line 9 from line 8)	10.	
11. Exemption amount (exemptions * \$4,050)	11.	
12. Subtract line 11 from line 10	12.	
13. Itemized or Standard deduction	13.	
14. Projected Taxable income (subtract line 13 from line 12)	14.	
15. Projected Tax	15.	
16. Alternative Minimum Tax	16.	
17. Total tax	17.	
18. Projected Credits	18.	
19. Subtract line 16 from line 15	19.	
20. Projected SE Tax - Taxpayer	20.	
21. Projected SE Tax - Spouse	21.	
22. Other taxes	22.	
23a. Add lines 19 through 22	23a.	
b. Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit, refundable American opportunity credit, and refundable credit from Form 8885	23b.	
c. Total 2016 estimated tax. Subtract line 23b from line 23a. If zero or less enter -0-	23c.	
24a. Multiply line 23c by 90% (66 2/3% for farmers and fishermen)	24a.	
b. Required annual payment based on prior year's tax (see instructions)	24b.	37,360
c. Required annual payment to avoid a penalty. Enter the smaller of line 24a or 24b	24c.	37,360
25. Projected Withholding	25.	34,011
26. Projected Net Tax (subtract line 25 from line 24c)	26.	3,349

Estimates will be computed on \$3,349. This is line 26.

Use screen ETA to provide accurate estimates of next year's income, deductions, and credits. If screen ETA is used, lines 1-24a of this worksheet will be autofilled.

PAGE 1

-2222

ST ADJ:

TAX RETURN COMPARISON 2013 / 2014 / 2015				2015
Name(s) as shown on return MUHAMMAD SIDDIQI				Identifying number 2222
	2013	2014	2015	Difference 2014-2015
Filing Status		1	1	
Number of Exemptions		1	1	
Income				
Wages, salaries, tips, etc.		94,206	162,198	67,992
Taxable interest and dividends				
Taxable state and local refunds				
Alimony				
Business income (loss)				
Gains (losses)				
Pensions and IRA distributions				
Rent and royalty income (loss)				
Part, S-corps, trusts income (loss)				
Farm income (loss)				
Unemployment compensation				
Total SS benefits received				
Taxable SS benefits				
Other income (loss)				
Total Income		94,206	162,198	67,992
Adjusted Gross Income				
Half of self-employment tax				
IRA deduction				
Other adjustments				
Total Adjusted Gross Income		94,206	162,198	67,992
Deductions				
Medical deductions				
State and local taxes		6,290	6,812	522
Interest		5,956	5,341	(615)
Contributions		1,000		(1,000)
Employee business expenses		3,705		(3,705)
Standard or other deductions				
Total Itemized or Standard Ded		16,951	12,153	(4,798)
Exemption Amount		3,950	4,000	50
Tax and Credits				
Taxable Income		73,305	146,045	72,740
Tax		14,188	33,964	19,776
Credits				
Self-employment tax				
Other taxes				
Total Tax		14,188	33,964	19,776
Payments				
Withholdings		15,999	36,149	20,150
Estimated tax payments			6,000	6,000
Earned income credit				
Other payments and credits				
Overpayment		1,811	8,185	6,374
Refund		1,811	8,185	6,374
Balance Due				
Resident State		TX		
Taxable income				
Tax				
Refund				
Balance Due				
Marginal tax rate		25.00	28.00	3.00
Effective tax rate		19.00	23.26	4.26

<b>Modified AGI Worksheets for Form 8962</b>		<b>2015</b>
(Keep for your records)		
Name as shown on return <b>MUHAMMAD SIDDIQI</b>	Social Security Number [REDACTED] - 2222	

**Taxpayer's Modified AGI Worksheet - Line 2a**

1. Enter your adjusted gross income (AGI)\* from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 37 ..... 1. 162,198
2. Enter any tax-exempt interest from Form 1040, line 8b; Form 1040A, line 8b; or Form 1040NR, line 9b ..... 2. \_\_\_\_\_
3. Enter any amounts from Form 2555, lines 45 and 50, and Form 2555-EZ, line 18 ..... 3. \_\_\_\_\_
4. Enter the excess, if any, of Form 1040, lines 20a over 20b; or Form 1040A, lines 14a over 14b ..... 4. \_\_\_\_\_
5. Add lines 1 through 4. Enter here and on Form 8962, line 2a ..... 162,198

**Dependents' Combined Modified AGI Worksheet - Line 2b**

1. Enter the AGI\* for your dependents from Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 3; and Form 1040NR, line 37 ..... 1. \_\_\_\_\_
2. Enter any tax-exempt interest for your dependents from Form 1040, line 8b; Form 1040A, line 8b; Form 1040EZ, the amount written to the left of the line 2 entry space; and Form 1040NR, line 9b ..... 2. \_\_\_\_\_
3. Enter any amounts for your dependents from Form 2555, lines 45 and 50, and Form 2555-EZ, line 18 ..... 3. \_\_\_\_\_
4. Enter for each of your dependents the excess, if any, of Form 1040, lines 20a over 20b; and Form 1040A, lines 14a over 14b ..... 4. \_\_\_\_\_
5. Add lines 1 through 4. Enter here and on Form 8962, line 2b ..... 5. \_\_\_\_\_

**Worksheet 2: Household Income as a Percentage of the Federal Poverty Line**

1. Enter the amount from line 3 of Form 8962 ..... 1. 162,198
2. Enter the amount from line 4 of Form 8962 ..... 2. 11,670
3. Multiply the amount on line 2 by 4.0 ..... 3. 46,680
4. Is the amount on line 1 more than the amount on line 3?
  - Yes. The amount on line 1 above is more than 400% of the Federal poverty line. Enter 401 here and on line 5 of Form 8962.
  - No. Divide the amount on line 1 by the amount on line 2. If the result is not a whole percentage, do not round, use only the first two numbers after the decimal point. Enter the result here and on line 5 of Form 8962. For example, for 0.9984, enter the result as 99; for 1.8565, enter the result as 185; for 3.997, enter the result as 399..... 4. 401



**Federal Supporting Statements**

Name(s) as shown on return

MUHAMMAD SIDDIQI

**2015 PG01**

Your Social Security Number

-2222

**All Source Gross Income**

WK\_TTLGI

**Description**

Wages and tips  
Schedule E rent

**Amount**

162,198

1,434

**Total**

163,632

**Client Copy**

Form <b>1040</b> Department of the Treasury - Internal Revenue Service (99) <b>U.S. Individual Income Tax Return</b> <b>2016</b>		OMB No. 1545-0074	IRS Use Only-Do not write or staple in this space.
For the year Jan. 1-Dec. 31, 2016, or other tax year beginning		2016, ending	20
Your first name and initial <b>MUHAMMAD</b>	Last name <b>SIDDIQI</b>	See separate instructions. Your social security number <b>-2222</b>	
If a joint return, spouse's first name and initial	Last name	Spouse's social security number	
Home address (number and street). <b>6701 HAVENHURST CT</b>		Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>ALLEN TX 75002</b>			
Foreign country name		Foreign province/state/county	Foreign postal code
Filing Status 1 <input checked="" type="checkbox"/> Single 2 <input type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶		4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 5 <input type="checkbox"/> Qualifying widow(er) with dependent child	
Exemptions 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a b <input type="checkbox"/> Spouse		Boxes checked on 6a and 6b No. of children on 6c who: • lived with you • did not live with you due to divorce or separation (see instructions) Dependents on 6c not entered above Add numbers on lines above ▶ <b>1</b>	
c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) Chk if child under age 17 qualifying for child tax credit (see instructions)			
d Total number of exemptions claimed			
Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2		7	<b>149,100</b>
8a Taxable interest. Attach Schedule B if required		8a	
b Tax-exempt interest. Do not include on line 8a		8b	
9a Ordinary dividends. Attach Schedule B if required		9a	
b Qualified dividends		9b	
10 Taxable refunds, credits, or offsets of state and local income taxes		10	
11 Alimony received		11	
12 Business income or (loss). Attach Schedule C or C-EZ		12	<b>1,976</b>
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		13	
14 Other gains or (losses). Attach Form 4797		14	
15a IRA distributions 15a b Taxable amount		15a	
16a Pensions and annuities 16a b Taxable amount		16a	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	
18 Farm income or (loss). Attach Schedule F		18	
19 Unemployment compensation		19	
20a Social security benefits 20a b Taxable amount		20a	
21 Other income		21	
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income		22	<b>151,076</b>
Adjusted Gross Income 23 Educator expenses		23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ		24	
25 Health savings account deduction. Attach Form 8889		25	
26 Moving expenses. Attach Form 3903		26	
27 Deductible part of self-employment tax. Attach Schedule SE		27	<b>27</b>
28 Self-employed SEP, SIMPLE, and qualified plans		28	
29 Self-employed health insurance deduction		29	
30 Penalty on early withdrawal of savings		30	
31a Alimony paid b Recipient's SSN▶		31a	
32 IRA deduction		32	
33 Student loan interest deduction		33	
34 Tuition and fees. Attach Form 8917		34	
35 Domestic production activities deduction. Attach Form 8903		35	
36 Add lines 23 through 35		36	<b>27</b>
37 Subtract line 36 from line 22. This is your adjusted gross income		37	<b>151,049</b>

Form 1040 (2016) MUHAMMAD SIDDIQI

-2222 Page 2

**Tax and Credits**

38	Amount from line 37 (adjusted gross income)	38	151,049
39a	Check <input type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes checked <input type="checkbox"/> 39a		
	If: <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind.		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	40,258
41	Subtract line 40 from line 38	41	110,791
42	Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 8d. Otherwise, see instructions	42	4,050
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	106,741
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4872 c <input type="checkbox"/>	44	22,924
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	22,924
48	Foreign tax credit. Attach Form 1116 if required	48	
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credit. Attach Form 5695	53	
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
55	Add lines 48 through 54. These are your total credits	55	
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	22,924

**Other Taxes**

57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	53
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/> X	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions: enter code(s)	62	
63	Add lines 56 through 62. This is your total tax	63	22,977

**Payments**

64	Federal income tax withheld from Forms W-2 and 1099	64	30,101
65	2016 estimated tax payments and amount applied from 2015 return	65	
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election <input type="checkbox"/> 66b		
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	
71	Excess social security and tier 1 RRTA tax withheld	71	1,898
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a <input type="checkbox"/> 8885 b <input type="checkbox"/> 8885 c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	31,999

**Refund**

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	9,022
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	9,022
	Routing number <input type="checkbox"/> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
77	Amount of line 75 you want applied to your 2017 estimated tax	77	

**Amount You Owe**

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
79	Estimated tax penalty (see instructions)	79	

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☒ No

Designee's name  Phone no.  Personal identification number (PIN)

**Sign Here**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amount and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature  Date  Your occupation  Daytime phone number

Spouse's signature. If a joint return, both must sign.  Date  Spouse's occupation  Identity Protection PIN (see inst.)

**Paid Preparer Use Only**

Preparer's signature  Date  Check ☒ if self-employed PTIN

Print/Type preparer's name  R S Easley

Firm's name  Tax Filing Services

Firm's address  736 N Main

Firm's EIN  81-3434943

Duncanville, TX 75116

Phone no.  972-298-2161

SCHEDULE A (Form 1040)		Itemized Deductions		OMB No. 1545-0074	
Department of the Treasury Internal Revenue Service (99)		Information about Schedule A and its separate instructions is at <a href="http://www.irs.gov/schedulea">www.irs.gov/schedulea</a> . Attach to Form 1040.		2016 Attachment Sequence No. 07	
Name(s) shown on Form 1040 <b>MUHAMMAD SIDDIQI</b>		Your social security number <b>2222</b>			
<b>Caution:</b> Do not include expenses reimbursed or paid by others.					
<b>Medical and Dental Expenses</b>	1 Medical and dental expenses (see instructions)	1			
	2 Enter amount from Form 1040, line 38	2			
	3 Multiply line 2 by 10% (0.10). But if either you or your spouse was born before January 2, 1952, multiply line 2 by 7.5% (0.075) instead	3			
	4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4			
<b>Taxes You Paid</b>	5 State and local (check only one box): a <input type="checkbox"/> Income taxes, or b <input checked="" type="checkbox"/> General sales taxes	5	1,204		
	6 Real estate taxes (see instructions)	6	5,387		
	7 Personal property taxes	7			
	8 Other taxes. List type and amount	8			
	9 Add lines 5 through 8	9		7,591	
	10 Home mortgage interest and points reported to you on Form 1098	10	32,667		
	11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	11			
	12 Points not reported to you on Form 1098. See instructions for special rules	12			
13 Mortgage insurance premiums (see instructions)	13				
14 Investment interest. Attach Form 4952 if required. (See instructions.)	14				
15 Add lines 10 through 14	15		32,667		
<b>Gifts to Charity</b>	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16			
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8263 if over \$500	17			
	18 Carryover from prior year	18			
	19 Add lines 16 through 18	19			
<b>Casualty and Theft Losses</b>	20 Casualty or theft loss (see instructions). Attach Form 4684. (See instructions.)	20			
<b>Job Expenses and Certain Miscellaneous Deductions</b>	21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instr.)	21			
	22 Tax preparation fees	22			
	23 Other expenses - investment, safe deposit box, etc. List type and amount	23			
	24 Add lines 21 through 23	24			
	25 Enter amount from Form 1040, line 38	25			
	26 Multiply line 25 by 2% (0.02)	26			
27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27				
<b>Other Miscellaneous Deductions</b>	28 Other - from list in instructions. List type and amount	28			
<b>Total Itemized Deductions</b>	29 Is Form 1040, line 38, over \$155,650? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29		40,258	
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here				

**SCHEDULE C-EZ  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)  
Name of proprietor

**Net Profit From Business**

(Sole Proprietorship)

- Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.  
► Attach to Form 1040, 1040NR, or 1041. ► See instructions.

OMB No. 1545-0074

**2016**

Attachment  
Sequence No. **09A**

**MUHAMMAD SIDDIQI**

Social security number (SSN)  
**-2222**

**Part I General Information**

You May Use  
Schedule C-EZ  
Instead of  
Schedule C  
Only If You:

- Had business expenses of \$5,000 or less.
- Use the cash method of accounting.
- Did not have an inventory at any time during the year.
- Did not have a net loss from your business.
- Had only one business as either a sole proprietor, qualified joint venture, or statutory employee.

And You:

- Had no employees during the year.
- Do not deduct expenses for business use of your home.
- Do not have prior year unallowed passive activity losses from this business, and
- Are not required to file Form 4562, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, to find out if you must file.

**A** Principal business or profession, including product or service  
**SECURITY**

**C** Business name. If no separate business name, leave blank.

**B** Enter business code (see page 2)

► **999999**

**D** Enter your EIN (see page 2)

**E** Business address (including suite or room no.). Address not required if same as on Form 1 of your tax return.

**6701 HAVENHURST CT**  
City, town or post office, state, and ZIP code  
**ALLEN, TX 75002**

**F** Did you make any payments in 2016 that would require you to file Form 1099? (see the instructions for Schedule C)

**G** If "Yes," did you or will you file required Forms 1099?

Yes No  
Yes No

**Part II Figure Your Net Profit**

**1** Gross receipts. Caution: If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see Statutory employees in the instructions for Schedule C, line 1, and check here

1 5,450

**2** Total expenses (see instructions). If more than \$5,000, you must use Schedule C

2 3,474

**3** Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13, and Schedule SE, line 2 (see instructions). (Statutory employees do not report this amount on Schedule SE, line 2.) Estates and trusts, enter on Form 1041, line 3

3 1,976

**Part III Information on Your Vehicle.** Complete this part only if you are claiming car or truck expenses on line 2.

**4** When did you place your vehicle in service for business purposes? (month, day, year)

► **01-01-2016**

**5** Of the total number of miles you drove your vehicle during 2016, enter the number of miles you used your vehicle for:

**a** Business **3,200** **b** Commuting (see instructions) **c** Other **9,000**

**6** Was your vehicle available for personal use during off-duty hours? ☒ Yes ☐ No

**7** Do you (or your spouse) have another vehicle available for personal use? ☒ Yes ☐ No

**8a** Do you have evidence to support your deduction? ☒ Yes ☐ No

**b** If "Yes," is the evidence written? ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions for Schedule C (Form 1040).

Schedule C-EZ (Form 1040) 2016

EEA

**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at [www.irs.gov/schedules](http://www.irs.gov/schedules).

OMB No. 1545-0074

**2016**

Attachment  
Sequence No. **13**

NAME(S) shown on return  
**MUHAMMAD SIDDIQI**

Your social security number

**- 2222**

**Part I** Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use  
Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

**A** Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No

**B** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

**1a** Physical address of each property (street, city, state, ZIP code)

**A** **8114 CARSON CT, ROWLETT, TX 75088**

**B**

**C**

<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	<b>1</b>		<b>365</b>	<b>0</b>	<input type="checkbox"/>
<b>B</b>					<input type="checkbox"/>
<b>C</b>					<input type="checkbox"/>

**Type of Property:**

**1** Single Family Residence

**3** Vacation/Short-Term Rental

**5** Land

**7** Self-Rental

**2** Multi-Family Residence

**4** Commercial

**6** Royalties

**8** Other (describe)

Income:	Properties:	A	B	C
<b>3</b> Rents received	<b>3</b>	21,384		
<b>4</b> Royalties received	<b>4</b>			
<b>Expenses:</b>				
<b>5</b> Advertising	<b>5</b>			
<b>6</b> Auto and travel (see instructions)	<b>6</b>			
<b>7</b> Cleaning and maintenance	<b>7</b>			
<b>8</b> Commissions	<b>8</b>			
<b>9</b> Insurance	<b>9</b>	1,778		
<b>10</b> Legal and other professional fees	<b>10</b>			
<b>11</b> Management fees	<b>11</b>			
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>			
<b>13</b> Other interest	<b>13</b>			
<b>14</b> Repairs	<b>14</b>	3,695		
<b>15</b> Supplies	<b>15</b>			
<b>16</b> Taxes	<b>16</b>	5,197		
<b>17</b> Utilities	<b>17</b>			
<b>18</b> Depreciation expense or depletion	<b>18</b>	5,421		
<b>19</b> Other (list) ▶	<b>19</b>			
<b>20</b> Total expenses. Add lines 5 through 19	<b>20</b>	16,091		
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6199	<b>21</b>	5,293		
<b>22</b> Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	<b>22</b>	( 5,293 )		
<b>23a</b> Total of all amounts reported on line 3 for all rental properties	<b>23a</b>	21,384		
<b>b</b> Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>	0		
<b>c</b> Total of all amounts reported on line 12 for all properties	<b>23c</b>	0		
<b>d</b> Total of all amounts reported on line 18 for all properties	<b>23d</b>	5,421		
<b>e</b> Total of all amounts reported on line 20 for all properties	<b>23e</b>	16,091		
<b>24</b> Income. Add positive amounts shown on line 21. Do not include any losses	<b>24</b>		5,293	
<b>25</b> Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>	( 5,293 )		
<b>26</b> Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>		0	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2016

EEA

Schedule SE (Form 1040) 2016

Attachment Sequence No. 17

Page 2

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR)

MUHAMMAD SIDDIQI

Social security number of person  
with self-employment income ▶

- 2222

**Section B—Long Schedule SE**

**Part I Self-Employment Tax**

**Note.** If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

**A** If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I ☐

**1a** Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. **Note.** Skip lines 1a and 1b if you use the farm optional method (see instructions)

**b** If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z

**2** Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. **Note.** Skip this line if you use the nonfarm optional method (see instructions)

**3** Combine lines 1a, 1b, and 2

**4a** If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3. **Note.** If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

**b** If you elect one or both of the optional methods, enter the total of lines 15 and 17 here

**c** Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax

**Exception.** If less than \$400 and you had church employee income, enter -0- and continue

**5a** Enter your church employee income from Form W-2. See instructions for definition of church employee income

**b** Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-

**6** Add lines 4c and 5b

**7** Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2016

**8a** Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$118,500 or more, skip lines 8b through 10, and go to line 11

**b** Unreported tips subject to social security tax (from Form 4137, line 10)

**c** Wages subject to social security tax (from Form 8919, line 10)

**d** Add lines 8a, 8b, and 8c

**9** Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11

**10** Multiply the smaller of line 6 or line 9 by 12.4% (0.124)

**11** Multiply line 6 by 2.9% (0.029)

**12** Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 57, or Form 1040NR, line 55

**13** Deduction for one-half of self-employment tax.

Multiply line 12 by 50% (0.50). Enter the result here and on

Form 1040, line 27, or Form 1040NR, line 27

**Part II Optional Methods To Figure Net Earnings** (see instructions)

**Farm Optional Method.** You may use this method only if (a) your gross farm income<sup>1</sup> was not more than \$7,560, or (b) your net farm profits<sup>2</sup> were less than \$5,457.

**14** Maximum income for optional methods

**15** Enter the smaller of: two-thirds (2/3) of gross farm income<sup>1</sup> (not less than zero) or \$5,040. Also include this amount on line 4b above

**Nonfarm Optional Method.** You may use this method only if (a) your net nonfarm profits<sup>3</sup> were less than \$5,457 and also less than 72.189% of your gross nonfarm income<sup>4</sup>, and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution.** You may use this method no more than five times.

**16** Subtract line 15 from line 14

**17** Enter the smaller of: two-thirds (2/3) of gross nonfarm income<sup>4</sup> (not less than zero) or the amount on line 16. Also include this amount on line 4b above

<sup>1</sup> From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.

<sup>2</sup> From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

<sup>3</sup> From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.

<sup>4</sup> From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

EEA

Schedule SE (Form 1040) 2016

Form **8582**

# Passive Activity Loss Limitations

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

Department of the Treasury  
Internal Revenue Service (99)

▶ Information about Form 8582 and its instructions is available at [www.irs.gov/form8582](http://www.irs.gov/form8582).

OMB No. 1545-1004

**2016**

Attachment

Sequence No. **88**

Name(s) shown on return

**MUHAMMAD SIDDIQI**

Identifying number

**-2222**

## **Part I** 2016 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)

1a	Activities with net income (enter the amount from Worksheet 1, column (a))	1a	5,293	
1b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	( )	
1c	Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	1,199	
1d	Combine lines 1a, 1b, and 1c	1d	(6,906)	

Commercial Revitalization Deductions From Rental Real Estate Activities

2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a	( )	
2b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	( )	
2c	Add lines 2a and 2b	2c	( )	

All Other Passive Activities

3a	Activities with net income (enter the amount from Worksheet 3, column (a))	3a	( )	
3b	Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	( )	
3c	Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	( )	
3d	Combine lines 3a, 3b, and 3c	3d	( )	

4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior years unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used. If line 4 is a loss and: • Line 1d is a loss, go to Part II. • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.	4	(6,906)	
---	---	---	---------	--

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

## **Part II** Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

5	Enter the smaller of the loss on line 1d or the loss on line 4	5	6,906
6	Enter \$150,000. If married filing separately, see instructions	6	150,000
7	Enter modified adjusted gross income, but not less than zero (see inst.) Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	7	151,076
8	Subtract line 7 from line 6	8	( )
9	Multiply line 8 by 50% (0.5). Do not enter more than \$25,000. If married filing separately, see instructions	9	( )
10	Enter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.	10	0

## **Part III** Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	( )
12	Enter the loss from line 4	12	( )
13	Reduce line 12 by the amount on line 10	13	( )
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	( )

## **Part IV** Total Losses Allowed

15	Add the income, if any, on lines 1a and 3a and enter the total	15	5,293
16	Total losses allowed from all passive activities for 2016. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	16	5,293

For Paperwork Reduction Act Notice, see Instructions.

EEA

Form 8582 (2016)



Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No. 1545-0172

**2016**

Attachment  
Sequence No. **179**

Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return

► Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562).

MUHAMMAD SIDDIQI

Business or activity to which this form relates

RENTAL HOUSE

Identifying number

-2222

## **Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

## **Part II Special Depreciation Allowance and Other Depreciation** (Don't include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

## **Part III MACRS Depreciation** (Don't include listed property.) (See instructions.)

### **Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	5,421
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

### **Section B - Assets Placed in Service During 2016 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property						
h Residential real property			25 yrs.		S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

### **Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System**

20a Class life					
b 12-year			12 yrs.		S/L
c 40-year			40 yrs.	MM	S/L

## **Part IV Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	5,421
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate Instructions.

EEA

Form 4562 (2016)

**Worksheet 4**

Use this worksheet if an amount is shown on Form 8582, line 10 or 14  
(See instructions.)

Name(s) as shown on return

MUHAMMAD SIDDIQI

2016

Tax ID Number

2222

	Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
1	RENTAL HOUSE	E LN 22	6,906	1	0	6,906
Total			6,906	1.00	0	6,906

**Worksheet 5**  
**Allocation of Unallowed Losses**  
(See instructions.)

**2016**

Name(s) as shown on return

MUHAMMAD SIDDIQI

Tax ID Number

-2222

	Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
1	RENTAL HOUSE	E LN 22	6,906	1	6,906
Total			6,906	1.00	6,906

**Worksheet 6**  
**Allowed Losses**  
(Keep for your records)

**2016**

Name(s) as shown on return

MUHAMMAD SIDDIQI

Tax ID Number

-2222

	Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
1	RENTAL HOUSE	E LN 22	12,199	6,906	5,293
Total			12,199	6,906	5,293

Form **8879**

**IRS e-file Signature Authorization**

Department of the Treasury  
Internal Revenue Service

► Don't send to the IRS. This isn't a tax return.  
► Keep this form for your records.

OMB No. 1545-0074

► Information about Form 8879 and its instructions is at [www.irs.gov/form8879](http://www.irs.gov/form8879).

**2016**

Submission Identification Number (SID) ►

Taxpayer's name

**MUHAMMAD SIDDIQI**

Social security number

**- 2222**

Spouse's name

Spouse's social security number

**Part I Tax Return Information - Tax Year Ending December 31, 2016** (Whole dollars only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Form 1040NR, line 37)	1	151,049
2	Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR, line 61)	2	22,977
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7; Form 1040NR, line 62a)	3	30,101
4	Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	9,022
5	Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1040NR, line 73)	5	

**Part II Taxpayer Declaration and Signature Authorization** (Be sure you read and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2016, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return, or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

RTN=111000614 Acct=1596921773

☒ I authorize **Tax Filing Services** to enter or generate my PIN **11111**

ERO firm name

as my signature on my tax year 2016 electronically filed income tax return.

Enter five digits, but  
don't enter all zeros

☐ I will enter my PIN as my signature on my tax year 2016 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ► **05-23-2017**

Spouse's PIN: check one box only

☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_

ERO firm name

as my signature on my tax year 2016 electronically filed income tax return.

Enter five digits, but  
don't enter all zeros

☐ I will enter my PIN as my signature on my tax year 2016 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

**Practitioner PIN Method Returns Only - continue below**

**Part III Certification and Authentication - Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

**757076-00003**

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2016 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub.1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► **L E Easley**

Date ► **05-23-2017**

**ERO Must Retain This Form - See Instructions  
Don't Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8879** (2016)

EEA

1040

Overflow Statement

2016  
Page 1

Name(s) as shown on return

MUHAMMAD SIDDIQI

Your Social Security Number

- 2222

SCHEDULE A, LINE 6 - REAL ESTATE TAXES

DESCRIPTION

BANK OF AMERICA 1098

AMOUNT

\$ 6,387

TOTAL:

\$ 6,387

Client Copy

1040

Overflow Statement

2016  
Page 1

Name(s) as shown on return

MUHAMMAD SIDDIQI

Your Social Security Number

-2222

SCHEDULE A, LINE 10 - HOME MTG INTEREST AND POINTS ON FORM 1

DESCRIPTION

BANK OF AMERICA 1098

CADENCE BANK 1098

AFFILIATED BANK 1098

AMOUNT

\$ 4,379

12,891

15,397

TOTAL:

\$ 32,667

Client Copy

### W-2 Detail Listing

Name(s) as shown on return

(Keep for your records)

2016

Tax ID Number

MUHAMMAD SIDDIQI

-2222

T/S	Employer Name	FEDERAL			STATE	
		Gross	W/H	State Code	Gross	W/H
T	EAGLE PROTECTIVE GRP INC	108,800	23,192			
T	HELPING RESTORE ABILITY	40,300	6,909			
Totals		149,100	30,101			

Client Copy



## Modified AGI Worksheets for Form 8962

Name(s) as shown on return

(Keep for your records)

2016

MUHAMMAD SIDDIQI

Tax ID Number

-2222

### Taxpayer's Modified AGI Worksheet - Line 2a

1. Enter your adjusted gross income (AGI)\* from Form 1040,  
line 38; Form 1040A, line 22; or Form 1040NR,  
line 37 ..... 1. 151,049
2. Enter any tax-exempt interest from Form  
1040, line 8b; Form 1040A, line 8b; or  
Form 1040NR, line 9b ..... 2. \_\_\_\_\_
3. Enter any amounts from Form 2555, lines  
45 and 50, and Form 2555-EZ,  
line 18 ..... 3. \_\_\_\_\_
4. Enter the excess, if any, of Form 1040,  
lines 20a over 20b; or Form 1040A, lines  
14a over 14b ..... 4. \_\_\_\_\_
5. Add lines 1 through 4. Enter here and on Form 8962,  
line 2a ..... 5. 151,049

### Dependents' Combined Modified AGI Worksheet - Line 2b

1. Enter the AGI\* for your dependents from Form 1040,  
line 38; Form 1040A, line 22; Form 1040EZ, line 4; and  
Form 1040NR, line 37 ..... 1. \_\_\_\_\_
2. Enter any tax-exempt interest for your  
dependents from Form 1040, line 8b; Form  
1040A, line 8b; Form 1040EZ, the amount  
written to the left of the line 2 entry space;  
and Form 1040NR, line 9b ..... 2. \_\_\_\_\_
3. Enter any amounts for your dependents  
from Form 2555, lines 45 and 50, and  
Form 2555-EZ, line 18 ..... 3. \_\_\_\_\_
4. Enter for each of your dependents the  
excess, if any, of Form 1040, lines 20a  
over 20b; and Form 1040A, lines 14a over  
14b ..... 4. \_\_\_\_\_
5. Add lines 1 through 4. Enter here and on Form 8962,  
line 2b ..... 5. \_\_\_\_\_

### Worksheet 2. Household Income as a Percentage of the Federal Poverty Line

1. Enter the amount from line 3 of Form  
8962 ..... 1. 151,049
2. Enter the amount from line 4 of Form  
8962 ..... 2. 11,770
3. Multiply the amount on line 2 by 4.0 ..... 3. 47,080
4. Is the amount on line 1 more than the amount on  
line 3?  
  - Yes. The amount on line 1 above is more  
than 400% of the Federal poverty line. Enter 401  
here and on line 5 of Form 8962.
  - No. Divide the amount on line 1 above by  
the amount on line 2 above. Do not round;  
instead multiply this number by 100 (to express  
it as a percentage) and then drop any numbers  
after the decimal point. Enter the result here and  
on line 5 of Form 8962. For example, for 0.9984,  
enter the result as 99; for 1.8565, enter the  
result as 185; for 3.997, enter the result as  
399\* ..... 4. 401

**Excess Social Security - Nonrailroad Employees  
Worksheet - Form 1040, Line 71**

(Keep for your records)

Name(s) as shown on return

MUHAMMAD SIDDIQI

2016

Tax ID Number

-2222

If you are filing a joint return, you must figure any excess tax withheld separately for each spouse. DO NOT combine amount of both husband and wife.

1. Add all social security tax withheld (but not more than \$7,347 for each employer). This tax should be shown in box 4 of your Forms W-2. Enter the total here . . . . . 1. 9,245
2. Enter any uncollected social security tax on tips or group-term life insurance on Form 1040, line 62, identified by "UT" . . . . . 2. \_\_\_\_\_
3. Add lines 1 and 2. If \$7,347 or less, stop here. You cannot claim the credit . . . . . 3. 9,245
4. Social security limit . . . . . 4. \$7,347
5. Excess. Subtract line 4 from line 3 . . . . . 5. 1,898

Client Copy

## Auto Expense Worksheet

Name(s) as shown on return

(Keep for your records)

2016

MUHAMMAD SIDDIQI

Tax ID Number

Profession/Business  
SECURITY

2222

Description

Date placed in service 2016-01-01

Number of miles your vehicle was used for:

Total Business miles driven during the year 3,200

Total Commuting miles driven during the year

Total Other miles driven during the year 9,000

Total Miles driven during the year 12,200

Business Use percentage 26.23

### Expenses:

Total

Business  
Percentage

Section 179

Bonus Depreciation

Depreciation

Garage Rent

Gas

Insurance

Licenses

Oil

Parking Fees

Rental Fees

Interest

Personal Property Tax

Repairs

Tires

Tolls

Other Expenses:

Total Expenses

### Standard Mileage Rate Calculation

Business miles 3,200 x 0.54 1,728 1,728

Parking fees

Tolls

Interest

Personal Property Tax

Total Standard Mile Rate deduction 1,728

### How It Is Reported:

Depreciation deduction

Auto Expense 1,728

Personal Property Taxes, Schedule A, Line 7

\* Item was disposed  
of during current year.

### Depreciation Detail Listing

RENTAL HOUSE

For your records only

2016

PAGE 1

Name(s) as shown on return

Social security number/EIN

MUHAMMAD SIDDIQI

-2222

No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
1	8114 CARSON CT ROWLET	01012015	149,100		100.00		149,100	27.5	SL	MM	3.636	5,421	10,617		
2	8114 CARSON CT LOT	01012015	30,000	30,000	100.00		0 0				0				5,421
Totals			179,100	30,000			149,100				5,421	10,617			5,421

Land Amount  
Net Depreciable Cost

179,100

ST ADJ:

TAX RETURN COMPARISON 2014 / 2015 / 2016				2016
Name(s) as shown on return MUHAMMAD SIDDIQI				Identifying number [REDACTED] 2222
	2014	2015	2016	Difference 2015-2016
Filing Status . . . . .	1	1	1	
Number of Exemptions . . . . .	1	1	1	
<b>Income</b>				
Wages, salaries, tips, etc. . . . .	94,206	162,198	149,100	(13,098)
Taxable interest and dividends . . . . .				
Taxable state and local refunds . . . . .				
Alimony . . . . .				
Business income (loss) . . . . .			1,976	1,976
Gains (losses) . . . . .				
Pensions and IRA distributions . . . . .				
Rent and royalty income (loss) . . . . .				
Part, S-corps, trusts income (loss) . . . . .				
Farm income (loss) . . . . .				
Unemployment compensation . . . . .				
Total SS benefits received . . . . .				
Taxable SS benefits . . . . .				
Other income (loss) . . . . .				
<b>Total Income</b> . . . . .	94,206	162,198	151,076	(11,122)
<b>Adjusted Gross Income</b>				
Half of self-employment tax . . . . .			27	27
IRA deduction . . . . .				
Other adjustments . . . . .				
<b>Total Adjusted Gross Income</b> . . . . .	94,206	162,198	151,049	(11,149)
<b>Deductions</b>				
Medical deductions . . . . .				
State and local taxes . . . . .	5,290	6,812	7,591	779
Interest . . . . .	3,256	5,341	32,667	27,326
Contributions . . . . .	1,600			
Employee business expenses . . . . .	3,705			
Standard or other deductions . . . . .				
<b>Total Itemized or Standard Ded</b> . . . . .	16,951	12,153	40,258	28,105
<b>Exemption Amount</b> . . . . .	3,950	4,000	4,050	50
<b>Tax and Credits</b>				
<b>Taxable Income</b> . . . . .	73,305	146,045	106,741	(39,304)
Tax . . . . .	14,188	33,964	22,924	(11,040)
Credits . . . . .				
Self-employment tax . . . . .			53	53
Other taxes . . . . .				
<b>Total Tax</b> . . . . .	14,188	33,964	22,977	(10,987)
<b>Payments</b>				
Withholdings . . . . .	15,999	36,149	31,999	(4,150)
Estimated tax payments . . . . .		6,000		(6,000)
Earned income credit . . . . .				
Other payments and credits . . . . .				
<b>Overpayment</b> . . . . .	1,811	8,185	9,022	837
Overpayment Applied . . . . .				
<b>Refund</b> . . . . .	1,811	8,185	9,022	837
<b>Balance Due</b> . . . . .				
<b>Resident State</b>	TX	TX		
Taxable income . . . . .				
Tax . . . . .				
<b>Refund</b> . . . . .				
<b>Balance Due</b> . . . . .				
Marginal tax rate . . . . .	25.00	28.00	28.00	
Effective tax rate . . . . .	19.00	23.00	21.48	(1.52)

## Tax Filing Services

736 N Main  
Duncanville, TX 75116

Phone: (972)298-2161 Fax: (972)298-5365

Muhammad Siddiqi  
6701 Havenhurst Ct  
Allen, TX 75002

Invoice Date: 05/23/2017

For professional services rendered in connection with the preparation  
of your 2016 individual tax return.

### Description

Fee

#### Federal and Supplemental Forms

Form 1040	- U.S. Individual Income Tax Return	
1040 Line Item Fee		
Form 1095-A	- Health Insurance Marketplace Statement	
Health Care	- ACA Minimum Essential Coverage Verification	
Schedule A	- Itemized Deductions	
Schedule C-EZ	- Net Profit from Business	
Schedule E pg 1	- Supplemental Income and Loss Page 1	
Schedule SE	- Self Employment Tax	
Form 4562	- Depreciation and Amortization	
Form 4868	- Application for Automatic Extension	
Form 8582	- Passive Activity Loss Limitations	
Form 8879	- E-File Signature Authorization	
Wks 85821	- Form 8582 Wksht - Line 1a, 1b, and 1c	
Wks 85824	- Form 8582 Wksht - Lines 10 and 14	
Wks 85825	- Form 8582 Wksht - Unallowed Losses	
Wks 85826	- Form 8582 Wksht - Allowed Losses	
Wksht 89621	- 8962 Modified AGI Worksheet line 2a	
Wks Auto	- Automobile Expense Worksheet	
Wks EIC B	- EIC Worksheet Page 2	
Wks Excess SS	- Excess Social Security Worksheet	
Wks MAGI	- Form 8582 Worksheet - Line 7 MAGI	
Wks PAL	- Passive Activity Carryover Worksheet	
Wks STAX	- State/Local Sales Tax Deduction Worksheet	
Comparison	- Tax Year Comparison Sheet	
Fed Withholdings	- Form 1040 - Federal Withholding From All Sources	
FED DEPR Schedule	- Federal Depreciation Schedule	
Next Year Depr	- Next Year Depreciation Schedule	
Overflow	- Itemized Listing Attachment	
Form W-2	- Wage and Tax Statement	
Form W-2	- Wage and Tax Statement	
W-2 Listing	- Listing of All Forms W-2	
Total Forms : 29	Forms Subtotal	\$ 195.00
	Total Balance Due	\$ 195.00

**ETD ELECTRONIC FILING MESSAGES**  
**MUST be corrected before electronic filing of extensions is allowed.**

Name(s) as shown on return

MUHAMMAD SIDDIQI

2016

Tax ID Number

-2222

5465 NO EXTENSION AFTER DUE DATE: Form 4868 must be filed before the filing deadline unless it is for a U.S. citizen or resident who is out of the country or for Form 1040NR where no wages were subject to U.S. income tax. Return to screen EXT and mark the appropriate box if either of these situations apply. Then, on screen MISC, make the appropriate selection from the "Extending due date" drop list.

Preparer Copy

Form **1040** Department of the Treasury—Internal Revenue Service (99) **2017** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2017, or other tax year beginning

Your first name **MUHAMMAD** M.I. Last name **SIDDIQI** Suffix  See separate instructions.  
If a joint return, spouse's first name M.I. Last name Suffix **2222** Your social security number **2222**  
Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. **6701 HAVENHURST CT** Apt. no.  Make sure the SSN(s) above and on line 6c are correct.  
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **ALLEN TX 75002-**  
Foreign country name  Foreign province/state/county  Foreign postal code

**Filing Status**

1 ☒ Single  
2 ☐ Married filing jointly (even if only one had income)  
3 ☐ Married filing separately. Enter spouse's SSN above and full name here.  
4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.

Check only one box.

**Exemptions**

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a  
b ☐ Spouse

**c Dependents:**

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If child under age 17 qualifying for child tax credit (see instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

d Total number of exemptions claimed **1**

**Income**

7 Wages, salaries, tips, etc. Attach Form(s) W-2 **139,668**  
8a Taxable interest. Attach Schedule B if required **8a**  
b Tax-exempt interest. Do not include on line 8a **8b**  
9a Ordinary dividends. Attach Schedule B if required **9a**  
b Qualified dividends **9b**  
10 Taxable refunds, credits, or offsets of state and local income taxes  
11 Alimony received  
12 Business income or (loss). Attach Schedule C or C-EZ  
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐  
14 Other gains or (losses). Attach Form 4797 **14**  
15a IRA distributions **15a** b Taxable amount **15b**  
16a Pensions and annuities **16a** b Taxable amount **16b**  
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17** **-3,650**  
18 Farm income or (loss). Attach Schedule F  
19 Unemployment compensation  
20a Social security benefits **20a** b Taxable amount **20b**  
21 Other income. List type and amount **21**  
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income **22** **136,018**

**Adjusted gross income**

23 Educator expenses **23**  
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ **24**  
25 Health savings account deduction. Attach Form 8889 **25**  
26 Moving expenses. Attach Form 3903 **26**  
27 Deductible part of self-employment tax. Attach Schedule SE **27**  
28 Self-employed SEP, SIMPLE, and qualified plans **28**  
29 Self-employed health insurance deduction **29**  
30 Penalty on early withdrawal of savings **30**  
31a Alimony paid b Recipient's SSN **31a**  
32 IRA deduction **32**  
33 Student loan interest deduction **33**  
34 Tuition and fees. Attach Form 8917 **34**  
35 Domestic production activities deduction. Attach Form 8903 **35**  
36 Add lines 23 through 35 **36**  
37 Subtract line 36 from line 22. This is your adjusted gross income **37** **136,018**

Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2017)



Form 1040 (2017)

MUHAMMAD SIDDIQI

2-2222

Page 2

## Tax and Credits

38 Amount from line 37 (adjusted gross income) **38** 136,018

39a Check ☐ You were born before January 2, 1953, ☐ Blind. ☐ Spouse was born before January 2, 1953, ☐ Blind. Total boxes checked **39a**

b If your spouse itemizes on a separate return or you were a dual-status alien, check here. **39b**

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) **40** 62,744

41 Subtract line 40 from line 38 **41** 73,274

42 Exemptions. If line 38 is \$156,900 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions **42** 4,050

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43** 69,224

44 Tax (see instructions). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐ **44** 13,045

45 Alternative minimum tax (see instructions). Attach Form 6251 **45** 642

46 Excess advance premium tax credit repayment. Attach Form 8962 **46**

47 Add lines 44, 45, and 46 **47** 13,687

48 Foreign tax credit. Attach Form 1116 if required **48**

49 Credit for child and dependent care expenses. Attach Form 2441 **49**

50 Education credits from Form 8863, line 19 **50**

51 Retirement savings contributions credit. Attach Form 8880 **51**

52 Child tax credit. Attach Schedule 8812, if required **52**

53 Residential energy credits. Attach Form 5695 **53**

54 Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐ **54**

55 Add lines 48 through 54. These are your total credits **55**

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- **56** 13,687

## Other taxes

57 Self-employment tax. Attach Schedule SE **57**

58 Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919 **58**

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required **59**

60a Household employment taxes from Schedule H **60a**

b First-time homebuyer credit repayment. Attach Form 5405 if required **60b**

61 Health care: individual responsibility (see instructions) Full-year coverage ☒ **61**

62 Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instructions; enter code(s) **62**

63 Add lines 56 through 62. This is your total tax **63** 13,687

## Payments

64 Federal income tax withheld from Forms W-2 and 1099 **64** 28,167

65 2017 estimated tax payments and amount applied from 2016 return **65**

66a Earned income credit (EIC) **66a**

b Nontaxable combat pay election **66b**

67 Additional child tax credit. Attach Schedule 8812 **67**

68 American opportunity credit from Form 8863, line 8 **68**

69 Net premium tax credit. Attach Form 8962 **69**

70 Amount paid with request for extension to file **70**

71 Excess social security and tier 1 RRTA tax withheld **71** 773

72 Credit for federal tax on fuels. Attach Form 4136 **72**

73 Credits from Form: a ☐ 2439 b ☒ Reserved c ☐ 8885 d ☐ **73**

74 Add lines 64, 65, 66a, and 67 through 73. These are your total payments **74** 28,940

## Refund

75 If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid **75** 15,253

76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here. **76a** 15,253

b Routing number **76b**

c Type: ☒ Checking ☐ Savings

d Account number 1773

77 Amount of line 75 you want applied to your 2018 estimated tax **77**

78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions **78**

79 Estimated tax penalty (see instructions) **79**

## Third Party signee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☒ No

Designee's name **39118** Phone no. **39118** Personal identification number (PIN) **39118**

## Preparer

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately reflect all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature **39118** Date **3/9/18** Your occupation **SECURITY OFFICER MNGR** Daytime phone number **972-743-9550**

Spouse's signature, if a joint return, both must sign. Date **3/9/18** Spouse's occupation **SECURITY OFFICER MNGR**

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) **39118**

Print/Type preparer's name **CGRIFIN** Preparer's signature **CGRIFIN** Date **3/9/18** Check ☒ if self-employed PTIN **P01913484**

Firm's name **LG4 CONSULTING** Firm's EIN **15-1111111**

Firm's address **5001 SOUTH COOPER STREET SUITE 210 ARLINGTON TX 76017** Phone no. **817-333-4127**

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Itemized Deductions**

Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.  
Attach to Form 1040.

OMB No. 1545-0074

**2017**

Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 28.

Your social security number

MUHAMMAD SIDDIQI

-2222

**Medical and Dental Expenses**

Caution: Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see instructions) **1**
- 2 Enter amount from Form 1040, line 38 **2** 136,018
- 3 Multiply line 2 by 7.5% (0.075) **3** 10,201
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- **4**

**Taxes You Paid**

5 State and local (check only one box):

- a ☐ Income taxes, or
- b ☒ General sales taxes

- 6 Real estate taxes (see instructions) **6** 11,096
- 7 Personal property taxes **7** 15,537
- 8 Other taxes. List type and amount **8** 7,035

9 Add lines 5 through 8 **9** 33,668

**Interest You Paid**

- 10 Home mortgage interest and points reported to you on Form 1098 **10** 12,263
- 11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address **11** 16,813

Name MUHAMMAD SIDDIQI

Address 6701 HAVENHURST CT

TIN 210534340

Note. Your mortgage interest deduction may be limited (see instructions).

- 12 Points not reported to you on Form 1098. See instructions for special rules **12**
- 13 Mortgage insurance premiums (see instructions) **13**
- 14 Investment interest. Attach Form 4952 if required. See instructions. **14**

15 Add lines 10 through 14 **15** 29,076

**Gifts to Charity**

If you made a gift and got a benefit for it, see instructions.

- 16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions **16**
- 17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 **17**
- 18 Carryover from prior year **18**

19 Add lines 16 through 18 **19**

**Casualty and Theft Losses**

- 20 Casualty or theft loss(es) other than net qualified disaster losses. Attach Form 4684 and enter the amount from line 18 of that form. See instructions. **20**

**Job Expenses and Certain Miscellaneous Deductions**

- 21 Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. See instructions. **21**
- 22 Tax preparation fees **22**
- 23 Other expenses—investment, safe deposit box, etc. List type and amount **23**

24 Add lines 21 through 23 **24**

25 Enter amount from Form 1040, line 38 **25** 136,018

26 Multiply line 25 by 2% (0.02) **26** 2,720

27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- **27**

**Other Miscellaneous Deductions**

- 28 Other—from list in instructions. List type and amount **28**

**Total Itemized Deductions**

29 Is Form 1040, line 38, over \$156,900? **29** 62,744

- ☒ No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.
- ☐ Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.

30 If you elect to itemize deductions even though they are less than your standard deduction, check here ☐

Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2017

**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

OMB No. 1545-0074

**2017**

Attachment  
Sequence No. 13

MUHAMMAD SIDDIQI

Your social security number

-2222

**Part I** **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2017 that would require you to file Form(s) 1099? (see instructions) . . . ☐ Yes ☒ No

B If "Yes," did you or will you file required Forms 1099? . . . ☐ Yes ☐ No

**1a** Physical address of each property (street, city, state, ZIP code)

A 8114 CARSON CT ROWLETT TX 75088-

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days			Personal Use Days		QJV
			A	B	C	A	B	
A	A		365					<input type="checkbox"/>
B								<input type="checkbox"/>
C								<input type="checkbox"/>

**Type of Property:**

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental  
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:		A	B	C
3	Rents received . . . . .	3		7,600		
4	Royalties received . . . . .	4				
<b>Expenses:</b>						
5	Advertising . . . . .	5				
6	Auto and travel (see instructions) . . . . .	6				
7	Cleaning and maintenance . . . . .	7		563		
8	Commissions . . . . .	8				
9	Insurance . . . . .	9		1,681		
10	Legal and other professional fees . . . . .	10				
11	Management fees . . . . .	11				
12	Mortgage interest paid to banks, etc. (see instructions) . . . . .	12				
13	Other interest . . . . .	13				
14	Repairs . . . . .	14		700		
15	Supplies . . . . .	15				
16	Taxes . . . . .	16		6,489		
17	Utilities . . . . .	17				
18	Depreciation expense or depletion . . . . .	18				
19	Other (list) ▶ MICS EXPENSES . . . . .	19		1,817		
20	Total expenses. Add lines 5 through 19 . . . . .	20		11,250		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . .	21		-3,650		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . .	22	(	3,650	)	( )
23a	Total of all amounts reported on line 3 for all rental properties . . . . .	23a		7,600		
23b	Total of all amounts reported on line 4 for all royalty properties . . . . .	23b				
23c	Total of all amounts reported on line 12 for all properties . . . . .	23c				
23d	Total of all amounts reported on line 18 for all properties . . . . .	23d				
23e	Total of all amounts reported on line 20 for all properties . . . . .	23e		11,250		
24	Income. Add positive amounts shown on line 21. Do not include any losses . . . . .	24				
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	25	(	3,650	)	
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . . . .	26				-3,650

For Paperwork Reduction Act Notice, see the separate instructions.

ICA

Schedule E (Form 1040) 2017

Form **6251**

# Alternative Minimum Tax—Individuals

Go to [www.irs.gov/Form6251](http://www.irs.gov/Form6251) for instructions and the latest information.

Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

**2017**

Attachment  
Sequence No. **32**

Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on Form 1040 or Form 1040NR

MUHAMMAD SIDDIQI

Your social security number

2222

## Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	73,274
2	Reserved for future use	2	
3	Taxes from Schedule A (Form 1040), line 9	3	33,668
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line.	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If Form 1040, line 38, is \$156,900 or less, enter -0-. Otherwise, see instructions.	6	( )
7	Tax refund from Form 1040, line 10 or line 21	7	( )
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount.	10	
11	Alternative tax net operating loss deduction	11	( )
12	Interest from specified private activity bonds exempt from the regular tax	12	
13	Qualified small business stock, see instructions	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	( )
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$249,450, see instructions.)	28	106,942

## Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2017, see instructions.) IF your filing status is . . . AND line 28 is not over . . . THEN enter on line 29 . . . Single or head of household . . . \$120,700 . . . \$54,300 Married filing jointly or qualifying widow(er) . . . 160,900 . . . 84,500 Married filing separately . . . 80,450 . . . 42,250 If line 28 is over the amount shown above for your filing status, see instructions.	29	54,300
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34.	30	52,642
31	• If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 64 here. • All others: If line 30 is \$187,800 or less (\$93,900 or less if married filing separately), multiply line 30 by 26% (0.26). Otherwise, multiply line 30 by 28% (0.28) and subtract \$3,756 (\$1,878 if married filing separately) from the result.	31	13,687
32	Alternative minimum tax foreign tax credit (see instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31.	33	13,687
34	Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any foreign tax credit from Form 1040, line 48. If you used Schedule J to figure your tax on Form 1040, line 44, refigure that tax without using Schedule J before completing this line (see instructions).	34	13,045
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45.	35	642

For Paperwork Reduction Act Notice, see your tax return instructions.

CA

Form **6251** (2017)

NVISIONIT FINANCIAL SOLUTIONS, LLC  
3010 LBJ FREEWAY, SUITE 1200  
DALLAS, TX 75234  
Phone: 972-919-6151  
Fax: (972) 739-0474  
JW@NVISIONIT.BIZ

October 30, 2019

MUHAMMAD SIDDIQI  
6701 HAVEN HURST CT  
PARKER, TX 75002

Dear MUHAMMAD,

I have prepared your 2018 federal income tax return based on the information you provided. The return has been successfully e-filed and a copy is enclosed for your records.

You will receive a federal refund check in the amount of \$536 in the mail.

You can check the status of your federal tax refund by using "Where's My Refund?", an interactive tool available on [www.irs.gov](http://www.irs.gov) or by using the "IRS2Go" smartphone application. You can also call the IRS TeleTax System at (800) 829-4477 or the IRS Refund Hotline at (800) 829-1954. When using any of these options, you will need the following information:

- The first social security number shown on the federal return
- Your filing status (Single)
- The exact amount of the refund shown on your federal return (\$536)

If you have any questions about your return(s) or about your tax situation during the year, please do not hesitate to call me at 972-919-6151. I appreciate this opportunity to serve you.

Sincerely,

JUAN J WILLIAMS  
NVISIONIT FINANCIAL SOLUTIONS, LLC

Your marginal federal tax rate ('tax bracket') for 2018 was 24%.  
Your average federal tax rate for 2018 was 19%.

**Privacy Notice**

As a tax practitioner, I receive and collect nonpublic personal information from various forms and statements that you provide. I do not disclose such information unless you instruct me to do so. I maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

**Federal  
Tax Return**

**MUHAMMAD SIDDIQI**

**2018**

**NVISIONIT FINANCIAL SOLUTIONS, LLC  
3010 LBJ FREEWAY, SUITE 1200  
DALLAS, TX 75234  
Phone: 972-919-6151  
Fax: (972) 739-0474  
JW@NVISIONIT.BIZ**

Form <b>8879</b>	<b>IRS e-file Signature Authorization</b>	OMB No. 1545-0074
Department of the Treasury Internal Revenue Service	▶ Return completed Form 8879 to your ERO. (Don't send to the IRS.) ▶ Go to <a href="http://www.irs.gov/Form8879">www.irs.gov/Form8879</a> for the latest information.	2018

Submission Identification Number (SID) ▶ 7528672019105s4rsk1n

Taxpayer's name <b>MUHAMMAD SIDDIQI</b>	Social security number [REDACTED]-2222
Spouse's name	Spouse's social security number

**Part I Tax Return Information — Tax Year Ending December 31, 2018 (Whole dollars only)**

1	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35) . . . . .	1	124,920
2	Total tax (Form 1040, line 15; Form 1040NR, line 61) . . . . .	2	19,823
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a) . . . . .	3	20,359
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a) . . . . .	4	536
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75) . . . . .	5	0

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

- ☐ I authorize NVISIONIT FINANCIAL SOLUTIONS, LLC to enter or generate my PIN 22222  
ERO firm name  
 as my signature on my tax year 2018 electronically filed income tax return. Enter five digits, but don't enter all zeros
- ☒ I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Spouse's PIN: check one box only**

- ☐ I authorize \_\_\_\_\_ to enter or generate my PIN   
ERO firm name  
 as my signature on my tax year 2018 electronically filed income tax return. Enter five digits, but don't enter all zeros
- ☐ I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Practitioner PIN Method Returns Only—continue below**

**Part III Certification and Authentication—Practitioner PIN Method Only**

**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN.

75286701234

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ JUAN J WILLIAMS Date ▶ 10/15/2019

**ERO Must Retain This Form — See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

DUPLICATE COPY

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury  
Internal Revenue Service

2018

Form 1040-V Payment Voucher

- Use this voucher when making a payment with Form 1040
- Do not staple this voucher or your payment to Form 1040
- Make your check or money order payable to the "United States Treasury"
- Write your Social Security Number (SSN) on your check or money order

Amount you are paying  
by check or money order ►

Dollars

1833

MUHAMMAD SIDDIQI  
6701 HAVEN HURST CT  
PARKER, TX 75002

Internal Revenue Service  
Austin, TX 73301-0002





MUHAMMAD SIDDIQI  
6701 HAVEN HURST CT  
PARKER, TX 75002

Internal Revenue Service  
Austin, TX 73301-0002



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Cut along solid line

---

Cut along solid line

MUHAMMAD SIDDIQI  
6701 HAVEN HURST CT  
PARKER, TX 75002

Internal Revenue Service  
Austin, TX 73301-0002



Federal Payment Voucher Mailing Slip

▼ DETACH HERE ▼

<b>Form 4868</b> <small>Department of the Treasury Internal Revenue Service (99)</small>	<b>Application for Automatic Extension of Time To File U.S. Individual Income Tax Return</b> <small>For calendar year 2018, or other tax year beginning , 2018, and ending ,</small>	<small>1833</small> <b>2018</b>												
<b>MUHAMMAD SIDDIQI</b> <b>6701 HAVEN HURST CT</b> <b>PARKER, TX 75002</b>  <div style="background-color: black; width: 80px; height: 20px; display: inline-block;"></div> -2222		<table style="width: 100%;"><tr><td style="width: 80%;">Line 4 - Estimate of total tax liability for year</td><td style="width: 20%; text-align: right;">\$ 0</td></tr><tr><td>Line 5 - Total payments</td><td style="text-align: right;">0</td></tr><tr><td>Line 6 - <b>Balance due.</b> Subtract line 5 from line 4</td><td style="text-align: right;">0</td></tr><tr><td>Line 7 - Amount you're paying (see inst)</td><td style="text-align: right;">0</td></tr><tr><td>Line 8 - Check here if you're "out of the country" and a U.S. citizen or resident</td><td style="text-align: right;">▶</td></tr><tr><td>Line 9 - Check here if you file Form 1040NR or 1040NR-EZ and didn't receive wages as an employee subject to U.S. income tax withholding</td><td style="text-align: right;">▶</td></tr></table>	Line 4 - Estimate of total tax liability for year	\$ 0	Line 5 - Total payments	0	Line 6 - <b>Balance due.</b> Subtract line 5 from line 4	0	Line 7 - Amount you're paying (see inst)	0	Line 8 - Check here if you're "out of the country" and a U.S. citizen or resident	▶	Line 9 - Check here if you file Form 1040NR or 1040NR-EZ and didn't receive wages as an employee subject to U.S. income tax withholding	▶
Line 4 - Estimate of total tax liability for year	\$ 0													
Line 5 - Total payments	0													
Line 6 - <b>Balance due.</b> Subtract line 5 from line 4	0													
Line 7 - Amount you're paying (see inst)	0													
Line 8 - Check here if you're "out of the country" and a U.S. citizen or resident	▶													
Line 9 - Check here if you file Form 1040NR or 1040NR-EZ and didn't receive wages as an employee subject to U.S. income tax withholding	▶													

Form	1040	Department of the Treasury—Internal Revenue Service (99)	2018	OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.																																			
Filing status: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately <input type="checkbox"/> Head of household <input type="checkbox"/> Qualifying widow(er)																																								
Your first name and initial <b>MUHAMMAD</b>		Last name <b>SIDDIQI</b>		Your social security number <b>██████-2222</b>																																				
Your standard deduction: <input type="checkbox"/> Someone can claim you as a dependent <input type="checkbox"/> You were born before January 2, 1954 <input type="checkbox"/> You are blind																																								
If joint return, spouse's first name and initial		Last name		Spouse's social security number																																				
Spouse standard deduction: <input type="checkbox"/> Someone can claim your spouse as a dependent <input type="checkbox"/> Spouse was born before January 2, 1954 <input type="checkbox"/> Spouse is blind <input type="checkbox"/> Spouse itemizes on a separate return or you were dual-status alien				<input checked="" type="checkbox"/> Full-year health care coverage or exempt (see inst.)																																				
Home address (number and street). If you have a P.O. box, see instructions. <b>6701 HAVEN HURST CT</b>				Apt. no.	Presidential Election Campaign (see inst.) <input type="checkbox"/> You <input type="checkbox"/> Spouse																																			
City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. <b>PARKER TX 75002</b>				If more than four dependents, see inst. and <input checked="" type="checkbox"/> here <input type="checkbox"/>																																				
<b>Dependents (see instructions):</b> <table border="1" style="width:100%; border-collapse: collapse; font-size: 8pt;"> <thead> <tr> <th style="width:30%;">(1) First name</th> <th style="width:20%;">Last name</th> <th style="width:15%;">(2) Social security number</th> <th style="width:15%;">(3) Relationship to you</th> <th style="width:15%;">(4) <input checked="" type="checkbox"/> If qualifies for (see inst.):</th> <th style="width:10%;">Child tax credit</th> <th style="width:10%;">Credit for other dependents</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>						(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> If qualifies for (see inst.):	Child tax credit	Credit for other dependents						<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>
(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> If qualifies for (see inst.):	Child tax credit	Credit for other dependents																																		
					<input type="checkbox"/>	<input type="checkbox"/>																																		
					<input type="checkbox"/>	<input type="checkbox"/>																																		
					<input type="checkbox"/>	<input type="checkbox"/>																																		
					<input type="checkbox"/>	<input type="checkbox"/>																																		
<b>Sign Here</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.</p> <p>Your signature _____ Date _____</p> <p>Spouse's signature. If a joint return, both must sign. _____ Date _____</p> </div> <div style="width: 45%;"> <p>Your occupation <b>POLICE OFFICER</b></p> <p>Spouse's occupation _____</p> <p>If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p> <p>If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p> </div> </div>																																								
<b>Paid Preparer Use Only</b> <table border="1" style="width:100%; border-collapse: collapse; font-size: 8pt;"> <tr> <td style="width:25%;">Preparer's name <b>JUAN J WILLIAMS</b></td> <td style="width:25%;">Preparer's signature <b>JUAN J WILLIAMS</b></td> <td style="width:15%;">PTIN <b>P00756178</b></td> <td style="width:15%;">Firm's EIN <b>82-4145274</b></td> <td style="width:20%;">Check if: <input type="checkbox"/> 3rd Party Designee <input checked="" type="checkbox"/> Self-employed</td> </tr> <tr> <td colspan="2">Firm's name ▶ <b>NVISIONIT FINANCIAL SOLUTIONS, LLC</b></td> <td colspan="3">Phone no. <b>972-919-6151</b></td> </tr> <tr> <td colspan="5">Firm's address ▶ <b>3010 LBJ FREEWAY, SUITE 1200, DALLAS, TX 75234</b></td> </tr> </table>						Preparer's name <b>JUAN J WILLIAMS</b>	Preparer's signature <b>JUAN J WILLIAMS</b>	PTIN <b>P00756178</b>	Firm's EIN <b>82-4145274</b>	Check if: <input type="checkbox"/> 3rd Party Designee <input checked="" type="checkbox"/> Self-employed	Firm's name ▶ <b>NVISIONIT FINANCIAL SOLUTIONS, LLC</b>		Phone no. <b>972-919-6151</b>			Firm's address ▶ <b>3010 LBJ FREEWAY, SUITE 1200, DALLAS, TX 75234</b>																								
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For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.  
HTA

Form **1040** (2018)

Form 1040 (2018)

MUHAMMAD SIDDIQI

222

Page 2

Attach Form(s)  
W-2. Also attach  
Form(s) V-2G and  
1099-R if tax was  
withheld.

**Standard  
Deduction for—**

- Single or married  
filing separately,  
\$12,000
- Married filing  
jointly or Qualifying  
widow(er),  
\$24,000
- Head of  
household,  
\$18,000
- If you checked  
any box under  
Standard  
deduction,  
see instructions.

1	Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .	1	124,920
2a	Tax-exempt interest . . . . .	2a	
3a	Qualified dividends . . . . .	3a	
4a	IRAs, pensions, and annuities . . . . .	4a	
5a	Social security benefits . . . . .	5a	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 . . . . .	6	124,920
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6 . . . . .	7	124,920
8	Standard deduction or Itemized deductions (from Schedule A) . . . . .	8	18,529
9	Qualified business income deduction (see instructions) . . . . .	9	
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0- . . . . .	10	106,391
11	a Tax (see inst) <u>19,823</u> (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/> b Add any amount from Schedule 2 and check here . . . . .	11	19,823
12	a Child tax credit/credit for other dependents <u>                    </u> b Add any amount from Schedule 3 and check here <input type="checkbox"/> c Form 8863	12	
13	Subtract line 12 from line 11. If zero or less, enter -0- . . . . .	13	19,823
14	Other taxes. Attach Schedule 4 . . . . .	14	
15	Total tax. Add lines 13 and 14 . . . . .	15	19,823
16	Federal income tax withheld from Forms W-2 and 1099 . . . . .	16	20,359
17	Refundable credits: a EIC (see inst.) <u>                    </u> b Sch 8812 <u>                    </u> c Form 8863 <u>                    </u> Add any amount from Schedule 5 <u>                    </u>	17	0
18	Add lines 16 and 17. These are your total payments . . . . .	18	20,359
19	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid . . . . .	19	536
20a	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/> b Routing number <u>XXXXXXXXXX</u> c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number <u>XXXXXXXXXXXXXXXXXXXX</u>	20a	536
21	Amount of line 19 you want applied to your 2019 estimated tax . . . . .	21	
22	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions . . . . .	22	0
23	Estimated tax penalty (see instructions) . . . . .	23	

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

Form 1040 (2018)

HTA

**SCHEDULE 2**  
**(Form 1040)**

**Tax**

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **02**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1040.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

-2222

<b>Tax</b>	<b>38-44</b>	Reserved . . . . .	<b>38-44</b>		
	<b>45</b>	Alternative minimum tax. Attach Form 6251 . . . . .	<b>45</b>		
	<b>46</b>	Excess advance premium tax credit repayment. Attach Form 8962 . . . . .	<b>46</b>		
	<b>47</b>	Add the amounts in the far right column. Enter here and include on Form 1040, line 11 . . . . .	<b>47</b>		0

**For Paperwork Reduction Act Notice, see your tax return instructions.**

Schedule 2 (Form 1040) 2018

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**SCHEDULE 3**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Nonrefundable Credits**

▶ Attach to Form 1040.

▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **03**

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

-2222

<b>Nonrefundable Credits</b>	<b>48</b>	Foreign tax credit. Attach Form 1116 if required . . . . .	<b>48</b>		
	<b>49</b>	Credit for child and dependent care expenses. Attach Form 2441 . . . . .	<b>49</b>		
	<b>50</b>	Education credits from Form 8863, line 19 . . . . .	<b>50</b>		
	<b>51</b>	Retirement savings contributions credit. Attach Form 8880 . . . . .	<b>51</b>		
	<b>52</b>	Reserved . . . . .	<b>52</b>		
	<b>53</b>	Residential energy credit. Attach Form 5695 . . . . .	<b>53</b>		
<b>54</b>	Other credits from Form a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> . . . . .	<b>54</b>			
<b>55</b>	Add the amounts in the far right column. Enter here and include on Form 1040, line 12			<b>55</b>	0

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2018

HTA

**SCHEDULE 4**  
**(Form 1040)**

**Other Taxes**

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **04**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1040.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

-2222

**Other  
Taxes**

- 57** Self-employment tax. Attach Schedule SE . . . . .
- 58** Unreported social security and Medicare tax from: Form **a** ☐ 4137 **b** ☐ 8919
- 59** Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required . . . . .
- 60a** Household employment taxes. Attach Schedule H . . . . .
- b** Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required . . . . .
- 61** Health care: individual responsibility (see instructions) . . . . .
- 62** Taxes from: **a** ☐ Form 8959 **b** ☐ Form 8960  
**c** ☐ Instructions; enter code(s) . . . . .
- 63** Section 965 net tax liability installment from Form 965-A . . . . . **63** | |
- 64** Add the amounts in the far right column. These are your **total other taxes**. Enter here and on Form 1040, line 14 . . . . .

<b>57</b>		
<b>58</b>		
<b>59</b>		
<b>60a</b>		
<b>60b</b>		
<b>61</b>		
<b>62</b>		
<b>63</b>		
<b>64</b>		0

**For Paperwork Reduction Act Notice, see your tax return instructions.**

**Schedule 4 (Form 1040) 2018**

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**SCHEDULE 5**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Other Payments and Refundable Credits**

▶ **Attach to Form 1040.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **05**

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

-2222

<b>Other</b>	<b>65</b>	Reserved . . . . .	<b>65</b>		
<b>Payments</b>	<b>66</b>	2018 estimated tax payments and amount applied from 2017 return . . . . .	<b>66</b>		
<b>and</b>	<b>67a</b>	Reserved . . . . .	<b>67a</b>		
<b>Refundable</b>	<b>b</b>	Reserved . . . . .	<b>67b</b>		
<b>Credits</b>	<b>68-69</b>	Reserved . . . . .	<b>68-69</b>		
	<b>70</b>	Net premium tax credit. Attach Form 8962 . . . . .	<b>70</b>		
	<b>71</b>	Amount paid with request for extension to file (see instructions) . . . . .	<b>71</b>		
	<b>72</b>	Excess social security and tier 1 RRTA tax withheld . . . . .	<b>72</b>		
	<b>73</b>	Credit for federal tax on fuels. Attach Form 4136 . . . . .	<b>73</b>		
	<b>74</b>	Credits from Form: a <input type="checkbox"/> 2439 b <input checked="" type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/> . . . . .	<b>74</b>		
	<b>75</b>	Add the amounts in the far right column. These are your total <b>other payments</b> <b>and refundable credits</b> . Enter here and include on Form 1040, line 17 . . . . .	<b>75</b>		0

**For Paperwork Reduction Act Notice, see your tax return instructions.**

Schedule 5 (Form 1040) 2018

HTA

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**SCHEDULE 6**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Foreign Address and Third Party Designee**

▶ **Attach to Form 1040.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **05A**

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

██████-2222

**Foreign  
Address**

Foreign country name

Foreign province/county

Foreign postal code

**Third Party  
Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)?

☐ Yes. Complete below. ☒ No

Designee's  
name ▶

Phone  
no. ▶

Personal identification number  
(PIN) ▶

**For Paperwork Reduction Act Notice, see your tax return instructions.**

Schedule 6 (Form 1040) 2018

HTA

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Form **2210**

Department of the Treasury  
Internal Revenue Service

# Underpayment of Estimated Tax by Individuals, Estates, and Trusts

► Go to [www.irs.gov/Form2210](http://www.irs.gov/Form2210) for instructions and the latest information.

► Attach to Form 1040, 1040NR, 1040NR-EZ, or 1041.

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **06**

Name(s) shown on tax return

MUHAMMAD SIDDIQI

Identifying number

2222

## Do You Have To File Form 2210?

Complete lines 1 through 7 below. Is line 7 less than \$1,000?

**Yes** → **Don't file Form 2210.** You don't owe a penalty.

**No** → Complete lines 8 and 9 below. Is line 6 equal to or more than line 9?

**Yes** → You don't owe a penalty. **Don't file Form 2210** (but if box E in Part II applies, you must file page 1 of Form 2210).

**No** → You may owe a penalty. Does any box in Part II below apply?

**Yes** → You **must** file Form 2210. Does box B, C, or D in Part II apply?

**No** → You **aren't** required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but **file only page 1 of Form 2210.**

**Yes** → You **must** figure your penalty.

**Don't file Form 2210.** You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but **don't file Form 2210.**

### Part I Required Annual Payment

1	Enter your 2018 tax after credits from Form 1040, line 13 (see instructions if not filing Form 1040) . . .	1	19,823
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions) . . . . .	2	
3	Refundable credits, including the premium tax credit (see instructions) . . . . .	3	( )
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't file Form 2210.</b> . . . . .	4	19,823
5	Multiply line 4 by 90% (0.90) . . . . .	5	17,841
6	Withholding taxes. <b>Don't</b> include estimated tax payments (see instructions) . . . . .	6	20,359
7	Subtract line 6 from line 4. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't file Form 2210</b> . . . . .	7	-536
8	Maximum required annual payment based on prior year's tax (see instructions) . . . . .	8	
9	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 5 or line 8 . . . . .	9	0

**Next:** Is line 9 more than line 6?

- ☐ **No.** You **don't** owe a penalty. **Don't file Form 2210** unless box E below applies.
- ☐ **Yes.** You may owe a penalty, but **don't file Form 2210** unless one or more boxes in Part II below applies.
- If box B, C, or D applies, you must figure your penalty and file Form 2210.
  - If box A or E applies (but not B, C, or D) file only page 1 of Form 2210. You **aren't** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210.**

### Part II Reasons for Filing. Check applicable boxes. If none apply, **don't file Form 2210.**

- A ☐ You request a **waiver** (see instructions) of your entire penalty due to tax reform or other reasons. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty.
- B ☐ You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C ☐ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D ☐ Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E ☐ You filed or are filing a joint return for either 2017 or 2018, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you **aren't** required to figure your penalty (unless box B, C, or D applies).

For Paperwork Reduction Act Notice, see separate instructions.

Form **2210** (2018)

HTA

Form 2210 (2018)

MUHAMMAD SIDDIQI

2222

Page 2

**Part III Short Method**

**Can You Use the Short Method?**

You can use the short method if:

- You made no estimated tax payments (or your only payments were withheld federal income tax), or
- You paid the same amount of estimated tax on each of the four payment due dates.

**Must You Use the Regular Method?**

You must use the regular method (Part IV) instead of the short method if:

- You made any estimated tax payments late,
- You checked box C or D in Part II, or
- You are filing Form 1040NR or 1040NR-EZ and you didn't receive wages as an employee subject to U.S. income tax withholding.

**Note:** If any payment was made earlier than the due date, you can use the short method, but using it may cause you to pay a larger penalty than the regular method. If the payment was only a few days early, the difference is likely to be small.

<b>10</b>	Enter the amount from Form 2210, line 9 . . . . .	<b>10</b>		
<b>11</b>	Enter the amount, if any, from Form 2210, line 6 . . . . .	<b>11</b>		
<b>12</b>	Enter the total amount, if any, of estimated tax payments you made . .	<b>12</b>		
<b>13</b>	Add lines 11 and 12 . . . . .	<b>13</b>		0
<b>14</b>	<b>Total underpayment for year.</b> Subtract line 13 from line 10. If zero or less, <b>stop</b> ; you don't owe a penalty. <b>Don't file Form 2210 unless you checked box E in Part II</b> . . . . .	<b>14</b>		0
<b>15</b>	Multiply line 14 by 0.03603 . . . . .	<b>15</b>		0
<b>16</b>	<ul style="list-style-type: none"> <li>• If the amount on line 14 was paid <b>on or after</b> 4/15/19, enter -0-</li> <li>• If the amount on line 14 was paid <b>before</b> 4/15/19, make the following computation to find the amount to enter on line 16.</li> </ul> <div style="margin-left: 40px;">                     Amount on line 14    X    Number of days paid before 4/15/19    X    0.00016 . . . . .                 </div>	<b>16</b>		0
<b>17</b>	<b>Penalty.</b> Subtract line 16 from line 15. Enter the result here and on Form 1040, line 23; Form 1040NR, line 76; Form 1040NR-EZ, line 26; or Form 1041, line 27. <b>Don't file Form 2210 unless you checked a box in Part II</b> . . . . .	<b>17</b>		0

Form **2210** (2018)

Form 2210 (2018)

MUHAMMAD SIDDIQI

2222

Page 3

**Part IV Regular Method** (See the instructions if you are filing Form 1040NR or 1040NR-EZ.)

**Section A—Figure Your Underpayment**

		Payment Due Dates			
		(a) 4/15/18	(b) 6/15/18	(c) 9/15/18	(d) 1/15/19
<b>18</b>	<b>Required installments.</b> If box C in Part II applies, enter the amounts from Schedule AI, line 27. Otherwise, enter 25% (0.25) of line 9, Form 2210, in each column . . . . .	<b>18</b>			
<b>19</b>	<b>Estimated tax paid and tax withheld</b> (see the instructions). For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you don't owe a penalty. <b>Don't file Form 2210 unless you checked a box in Part II</b> . . . . .	<b>19</b>	5,090	5,090	5,090
<b>Complete lines 20 through 26 of one column before going to line 20 of the next column.</b>					
<b>20</b>	Enter the amount, if any, from line 26 in the previous column . . . . .	<b>20</b>	5,090	10,180	15,270
<b>21</b>	Add lines 19 and 20 . . . . .	<b>21</b>	10,180	15,270	20,359
<b>22</b>	Add the amounts on lines 24 and 25 in the previous column . . . . .	<b>22</b>			
<b>23</b>	Subtract line 22 from line 21. If zero or less, enter -0-. For column (a) only, enter the amount from line 19 . . . . .	<b>23</b>	5,090	10,180	15,270
<b>24</b>	If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0- . . . . .	<b>24</b>	0	0	
<b>25</b>	<b>Underpayment.</b> If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of the next column. Otherwise, go to line 26 . . . . .	<b>25</b>	0	0	0
<b>26</b>	<b>Overpayment.</b> If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column . . . . .	<b>26</b>	5,090	10,180	15,270

**Section B—Figure the Penalty** (Use the Worksheet for Form 2210, Part IV, Section B—Figure the Penalty in the instructions.)

<b>27</b>	<b>Penalty.</b> Enter the total penalty from line 14 of the Worksheet for Form 2210, Part IV, Section B—Figure the Penalty. Also include this amount on Form 1040, line 23; Form 1040NR, line 76; Form 1040NR-EZ, line 26; or Form 1041, line 27. <b>Don't file Form 2210 unless you checked a box in Part II</b> . . . . .	<b>27</b>	0
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Form **2210** (2018)

Form 2210 (2018)

MUHAMMAD SIDDIQI

2-2222

Page 4

**Schedule AI—Annualized Income Installment Method** (See the instructions.)

Estates and trusts, don't use the period ending dates shown to the right. Instead, use the following: 2/28/18, 4/30/18, 7/31/18, and 11/30/18.

(a)  
1/1/18–3/31/18(b)  
1/1/18–5/31/18(c)  
1/1/18–8/31/18(d)  
1/1/18–12/31/18**Part I Annualized Income Installments**

<b>1</b>	Enter your adjusted gross income for each period (see instructions). (Estates and trusts, enter your taxable income without your exemption for each period.) . . . . .	<b>1</b>					0
<b>2</b>	Annualization amounts. (Estates and trusts, see instructions.)	<b>2</b>	4	2.4	1.5	1	
<b>3</b>	Annualized income. Multiply line 1 by line 2 . . . . .	<b>3</b>	0	0	0	0	
<b>4</b>	If you itemize, enter itemized deductions for the period shown in each column. All others enter -0-, and skip to line 7. <b>Exception:</b> Estates and trusts, skip to line 11 and enter amount from line 3	<b>4</b>					0
<b>5</b>	Annualization amounts . . . . .	<b>5</b>	4	2.4	1.5	1	
<b>6</b>	Multiply line 4 by line 5 . . . . .	<b>6</b>	0	0	0	0	
<b>7</b>	In each column, enter the full amount of your standard deduction from Form 1040, line 8. (Form 1040NR or 1040NR-EZ filers, enter -0-. <b>Exception:</b> Indian students and business apprentices, see instructions.)	<b>7</b>					
<b>8</b>	Enter the <b>larger</b> of line 6 or line 7 . . . . .	<b>8</b>	0	0	0	0	
<b>9</b>	Deduction for qualified business income . . . . .	<b>9</b>					0
<b>10</b>	Add lines 8 and 9 . . . . .	<b>10</b>	0	0	0	0	
<b>11</b>	Subtract line 10 from line 3 . . . . .	<b>11</b>	0	0	0	0	
<b>12</b>	Form 1040, 1040NR, or 1040NR-EZ filers, enter -0- in each column. (Estates and trusts, see instructions.) . . . . .	<b>12</b>					
<b>13</b>	Subtract line 12 from line 11. If zero or less, enter -0- . . . . .	<b>13</b>	0	0	0	0	
<b>14</b>	Figure your tax on the amount on line 13 (see instructions) . . . . .	<b>14</b>	0	0	0	0	
<b>15</b>	Self-employment tax from line 36 (complete Part II below) . . . . .	<b>15</b>					
<b>16</b>	Enter other taxes for each payment period including, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions) . . . . .	<b>16</b>					
<b>17</b>	Total tax. Add lines 14, 15, and 16 . . . . .	<b>17</b>	0	0	0	0	
<b>18</b>	For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3 (see instructions) . . . . .	<b>18</b>					
<b>19</b>	Subtract line 18 from line 17. If zero or less, enter -0- . . . . .	<b>19</b>	0	0	0	0	
<b>20</b>	Applicable percentage . . . . .	<b>20</b>	22.5%	45%	67.5%	90%	
<b>21</b>	Multiply line 19 by line 20 . . . . .	<b>21</b>	0	0	0	0	
<b>Complete lines 22–27 of one column before going to line 22 of the next column.</b>							
<b>22</b>	Enter the total of the amounts in all previous columns of line 21 . . . . .	<b>22</b>					
<b>23</b>	Subtract line 22 from line 21. If zero or less, enter -0- . . . . .	<b>23</b>	0	0	0	0	
<b>24</b>	Enter 25% (0.25) of line 9 on page 1 of Form 2210 in each column . . . . .	<b>24</b>	0	0	0	0	
<b>25</b>	Subtract line 27 of the previous column from line 26 of that column . . . . .	<b>25</b>		0	0	0	
<b>26</b>	Add lines 24 and 25 . . . . .	<b>26</b>	0	0	0	0	
<b>27</b>	Enter the <b>smaller</b> of line 23 or line 26 here and on Form 2210, Part IV, line 18 . . . . . ▶	<b>27</b>	0	0	0	0	

**Part II Annualized Self-Employment Tax** (Form 1040 and Form 1040NR filers only)

<b>28</b>	Net earnings from self-employment for the period (see instructions) . . . . .	<b>28</b>				
<b>29</b>	Prorated social security tax limit . . . . .	<b>29</b>	\$ 32,100	\$ 53,500	\$ 85,600	\$ 128,400
<b>30</b>	Enter actual wages for the period subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax. <b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions	<b>30</b>				
<b>31</b>	Subtract line 30 from line 29. If zero or less, enter -0- . . . . .	<b>31</b>				
<b>32</b>	Annualization amounts . . . . .	<b>32</b>	0.496	0.2976	0.186	0.124
<b>33</b>	Multiply line 32 by the <b>smaller</b> of line 28 or line 31 . . . . .	<b>33</b>				
<b>34</b>	Annualization amounts . . . . .	<b>34</b>	0.116	0.0696	0.0435	0.029
<b>35</b>	Multiply line 28 by line 34 . . . . .	<b>35</b>	0	0	0	
<b>36</b>	Add lines 33 and 35. Enter here and on line 15 above . ▶	<b>36</b>	0	0	0	

Form **2210** (2018)

**SCHEDULE A**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Itemized Deductions**

- Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.  
► Attach to Form 1040.

OMB No. 1545-0074

**2018**Attachment  
Sequence No. **07****Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on Form 1040

Your social security number

MUHAMMAD SIDDIQI

2222

**Medical  
and  
Dental  
Expenses****Caution:** Do not include expenses reimbursed or paid by others.

<b>1</b>	Medical and dental expenses (see instructions)	<b>1</b>	
<b>2</b>	Enter amount from Form 1040, line 7	<b>2</b>	124,920
<b>3</b>	Multiply line 2 by 7.5% (0.075)	<b>3</b>	9,369
<b>4</b>	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	<b>4</b>	0

**Taxes You  
Paid**

<b>5</b>	State and local		
<b>a</b>	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input checked="" type="checkbox"/>	<b>5a</b>	1,102
<b>b</b>	State and local real estate taxes (see instructions)	<b>5b</b>	17,101
<b>c</b>	State and local personal property taxes	<b>5c</b>	
<b>d</b>	Add lines 5a through 5c	<b>5d</b>	18,203
<b>e</b>	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	<b>5e</b>	10,000
<b>6</b>	Other taxes. List type and amount	<b>6</b>	
<b>7</b>	Add lines 5e and 6	<b>7</b>	10,000

**Interest  
You Paid****Caution:** Your mortgage interest deduction may be limited (see instructions).

<b>8</b>	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>		
<b>a</b>	Home mortgage interest and points reported to you on Form 1098	<b>8a</b>	8,029
<b>b</b>	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	<b>8b</b>	
<b>c</b>	Points not reported to you on Form 1098. See instructions for special rules	<b>8c</b>	
<b>d</b>	Reserved	<b>8d</b>	
<b>e</b>	Add lines 8a through 8c	<b>8e</b>	8,029
<b>9</b>	Investment interest. Attach Form 4952 if required. See instructions	<b>9</b>	
<b>10</b>	Add lines 8e and 9	<b>10</b>	8,029

**Gifts to  
Charity**

If you made a gift and got a benefit for it, see instructions.

<b>11</b>	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	<b>11</b>	
<b>12</b>	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	<b>12</b>	500
<b>13</b>	Carryover from prior year	<b>13</b>	
<b>14</b>	Add lines 11 through 13	<b>14</b>	500

**Casualty and  
Theft Losses**

<b>15</b>	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions	<b>15</b>	
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**Other  
Itemized  
Deductions**

<b>16</b>	Other—from list in instructions. List type and amount	<b>16</b>	
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**Total  
Itemized  
Deductions**

<b>17</b>	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040, line 8	<b>17</b>	18,529
<b>18</b>	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>		

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2018

HTA

**SCHEDULE A**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Itemized Deductions**Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.  
Attach to Form 1040.

OMB No. 1545-0074

**2018**Attachment  
Sequence No. **07****Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on Form 1040

MUHAMMAD SIDDIQI

Your social security number

2222

**Medical  
and  
Dental  
Expenses****Caution:** Do not include expenses reimbursed or paid by others.

- |   |   |   |   |   |
|---|---|---|---|---|
| 1 | Medical and dental expenses (see instructions)                        | 1 |   |   |
| 2 | Enter amount from Form 1040, line 7                                   | 2 |   |   |
| 3 | Multiply line 2 by 7.5% (0.075)                                       | 3 | 0 |   |
| 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | 4 |   | 0 |

**Taxes You  
Paid**

- |   |  |    |   |   |
|---|--|----|---|---|
| 5 | State and local  |    |   |   |
| a | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input type="checkbox"/> | 5a |   |   |
| b | State and local real estate taxes (see instructions)   | 5b |   |   |
| c | State and local personal property taxes  | 5c |   |   |
| d | Add lines 5a through 5c  | 5d | 0 |   |
| e | Enter the smaller of line 5d and \$10,000 (\$5,000 if married filing separately)   | 5e | 0 |   |
| 6 | Other taxes. List type and amount  | 6  |   |   |
| 7 | Add lines 5e and 6   | 7  |   | 0 |

**Interest  
You Paid****Caution:** Your mortgage interest deduction may be limited (see instructions).

- |    |  |    |   |   |
|----|--|----|---|---|
| 8  | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/> |    |   |   |
| a  | Home mortgage interest and points reported to you on Form 1098   | 8a |   |   |
| b  | Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address | 8b |   |   |
| c  | Points not reported to you on Form 1098. See instructions for special rules  | 8c |   |   |
| d  | Reserved   | 8d |   |   |
| e  | Add lines 8a through 8c  | 8e | 0 |   |
| 9  | Investment interest. Attach Form 4952 if required. See instructions  | 9  |   |   |
| 10 | Add lines 8e and 9   | 10 |   | 0 |

**Gifts to  
Charity**

If you made a gift and got a benefit for it, see instructions.

- |    |  |    |  |   |
|----|--|----|--|---|
| 11 | Gifts by cash or check. If you made any gift of \$250 or more, see instructions                                      | 11 |  |   |
| 12 | Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 | 12 |  |   |
| 13 | Carryover from prior year  | 13 |  |   |
| 14 | Add lines 11 through 13  | 14 |  | 0 |

**Casualty and  
Theft Losses**

- |    |  |    |  |  |
|----|--|----|--|--|
| 15 | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions | 15 |  |  |
|----|--|----|--|--|

**Other  
Itemized  
Deductions**

- |    |   |    |  |  |
|----|---|----|--|--|
| 16 | Other—from list in instructions. List type and amount | 16 |  |  |
|----|---|----|--|--|

**Total  
Itemized  
Deductions**

- |    |  |    |  |   |
|----|--|----|--|---|
| 17 | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040, line 8                   | 17 |  | 0 |
| 18 | If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/> |    |  |   |

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2018

HTA



**SCHEDULE C**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Profit or Loss From Business**

(Sole Proprietorship)

▶ Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.  
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **09**

Name of proprietor <b>MUHAMMAD SIDDIQI</b>		Social security number (SSN) <b>2222</b>
A Principal business or profession, including product or service (see instructions) <b>LAW ENFORCEMENT</b>		B Enter code from instructions <b>561600</b>
C Business name. If no separate business name, leave blank.		D Employer ID number (EIN) (see instr.)
E Business address (including suite or room no.) City, town or post office, state, and ZIP code		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2018? If "No," see instructions for limit on losses . . . . .		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2018, check here . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Did you make any payments in 2018 that would require you to file Form(s) 1099? (see instructions) . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Forms 1099? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Part I Income**

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . .	1				
2 Returns and allowances . . . . .	2				
3 Subtract line 2 from line 1 . . . . .	3			0	
4 Cost of goods sold (from line 42) . . . . .	4				
5 <b>Gross profit.</b> Subtract line 4 from line 3 . . . . .	5			0	
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .	6				
7 <b>Gross income.</b> Add lines 5 and 6 . . . . .	7			0	

**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.

8 Advertising . . . . .	8			18 Office expense (see instructions) . . . . .	18	
9 Car and truck expenses (see instructions) . . . . .	9			19 Pension and profit-sharing plans . . . . .	19	
10 Commissions and fees . . . . .	10			20 Rent or lease (see instructions):		
11 Contract labor (see instructions) . . . . .	11			a Vehicles, machinery, and equipment . . . . .	20a	
12 Depletion . . . . .	12			b Other business property . . . . .	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .	13			21 Repairs and maintenance . . . . .	21	
14 Employee benefit programs (other than on line 19) . . . . .	14			22 Supplies (not included in Part III) . . . . .	22	
15 Insurance (other than health) . . . . .	15			23 Taxes and licenses . . . . .	23	
16 Interest (see instructions):				24 Travel and meals:		
a Mortgage (paid to banks, etc.) . . . . .	16a			a Travel . . . . .	24a	
b Other . . . . .	16b			b Deductible meals (see instructions) . . . . .	24b	
17 Legal and professional services . . . . .	17			25 Utilities . . . . .	25	
28 <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a . . . . .	28			26 Wages (less employment credits) . . . . .	26	
29 Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	29			27a Other expenses (from line 48) . . . . .	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). <b>Simplified method filers only:</b> enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30. . . . .	30			b <b>Reserved for future use</b> . . . . .	27b	
31 <b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Schedule 1 (Form 1040), line 12</b> (or <b>Form 1040NR, line 13</b> ) and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> . • If a loss, you <b>must</b> go to line 32.	31					
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040), line 12</b> (or <b>Form 1040NR, line 13</b> ) and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> . • If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.				32a <input type="checkbox"/> All investment is at risk.		
				32b <input type="checkbox"/> Some investment is not at risk.		

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2018

Schedule C (Form 1040) 2018

MUHAMMAD SIDDIQI

-2222

Page 2

**Part III Cost of Goods Sold** (see instructions)

**33** Method(s) used to value closing inventory:    **a** ☐ Cost    **b** ☐ Lower of cost or market    **c** ☐ Other (attach explanation)

**34** Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
If "Yes," attach explanation . . . . . ☐ Yes    ☐ No

<b>35</b> Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . . .	<b>35</b>	
<b>36</b> Purchases less cost of items withdrawn for personal use . . . . .	<b>36</b>	
<b>37</b> Cost of labor. Do not include any amounts paid to yourself . . . . .	<b>37</b>	
<b>38</b> Materials and supplies . . . . .	<b>38</b>	
<b>39</b> Other costs . . . . .	<b>39</b>	
<b>40</b> Add lines 35 through 39 . . . . .	<b>40</b>	0
<b>41</b> Inventory at end of year . . . . .	<b>41</b>	
<b>42</b> <b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4 . . . . .	<b>42</b>	0

**Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

**43** When did you place your vehicle in service for business purposes? (month, day, year) ▶ \_\_\_\_\_

**44** Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for:

**a** Business \_\_\_\_\_ **b** Commuting (see instructions) \_\_\_\_\_ **c** Other \_\_\_\_\_

**45** Was your vehicle available for personal use during off-duty hours? . . . . . ☐ Yes    ☐ No

**46** Do you (or your spouse) have another vehicle available for personal use? . . . . . ☐ Yes    ☐ No

**47a** Do you have evidence to support your deduction? . . . . . ☐ Yes    ☐ No

**b** If "Yes," is the evidence written? . . . . . ☐ Yes    ☐ No

**Part V Other Expenses.** List below business expenses not included on lines 8–26 or line 30.

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<b>48</b> <b>Total other expenses.</b> Enter here and on line 27a . . . . .	<b>48</b> 0

Form **6251****Alternative Minimum Tax—Individuals**

OMB No. 1545-0074

**2018**Attachment  
Sequence No. **32**Department of the Treasury  
Internal Revenue Service (99)▶ Go to [www.irs.gov/Form6251](http://www.irs.gov/Form6251) for instructions and the latest information.

▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

MUHAMMAD SIDDIQI

2222

**Part I Alternative Minimum Taxable Income** (See instructions for how to complete each line.)

<b>1</b>	Enter the amount from Form 1040, line 10, if more than zero. If Form 1040, line 10, is zero, subtract lines 8 and 9 of Form 1040 from line 7 of Form 1040 and enter the result here. (If less than zero, enter as a negative amount.) . . . . .	<b>1</b>	106,391
<b>2a</b>	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040, line 8 . . . . .	<b>2a</b>	10,000
<b>b</b>	Tax refund from Schedule 1 (Form 1040), line 10 or line 21 . . . . .	<b>2b</b>	( )
<b>c</b>	Investment interest expense (difference between regular tax and AMT) . . . . .	<b>2c</b>	
<b>d</b>	Depletion (difference between regular tax and AMT) . . . . .	<b>2d</b>	
<b>e</b>	Net operating loss deduction from Schedule 1 (Form 1040), line 21. Enter as a positive amount . . . . .	<b>2e</b>	
<b>f</b>	Alternative tax net operating loss deduction . . . . .	<b>2f</b>	( )
<b>g</b>	Interest from specified private activity bonds exempt from the regular tax . . . . .	<b>2g</b>	
<b>h</b>	Qualified small business stock, see instructions . . . . .	<b>2h</b>	
<b>i</b>	Exercise of incentive stock options (excess of AMT income over regular tax income) . . . . .	<b>2i</b>	
<b>j</b>	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) . . . . .	<b>2j</b>	
<b>k</b>	Disposition of property (difference between AMT and regular tax gain or loss) . . . . .	<b>2k</b>	
<b>l</b>	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) . . . . .	<b>2l</b>	
<b>m</b>	Passive activities (difference between AMT and regular tax income or loss) . . . . .	<b>2m</b>	
<b>n</b>	Loss limitations (difference between AMT and regular tax income or loss) . . . . .	<b>2n</b>	
<b>o</b>	Circulation costs (difference between regular tax and AMT) . . . . .	<b>2o</b>	
<b>p</b>	Long-term contracts (difference between AMT and regular tax income) . . . . .	<b>2p</b>	
<b>q</b>	Mining costs (difference between regular tax and AMT) . . . . .	<b>2q</b>	
<b>r</b>	Research and experimental costs (difference between regular tax and AMT) . . . . .	<b>2r</b>	
<b>s</b>	Income from certain installment sales before January 1, 1987 . . . . .	<b>2s</b>	( )
<b>t</b>	Intangible drilling costs preference . . . . .	<b>2t</b>	
<b>3</b>	Other adjustments, including income-based related adjustments . . . . .	<b>3</b>	
<b>4</b>	<b>Alternative minimum taxable income.</b> Combine lines 1 through 3. (If married filing separately and line 4 is more than \$718,800, see instructions.) . . . . .	<b>4</b>	116,391

**Part II Alternative Minimum Tax (AMT)**

<b>5</b>	Exemption. (If you were under age 24 at the end of 2018, see instructions.) . . . . . <b>IF your filing status is . . . . . AND line 4 is not over . . . . . THEN enter on line 5 . . . . .</b> Single or head of household . . . . . \$ 500,000 . . . . . \$ 70,300 Married filing jointly or qualifying widow(er) . . . . . 1,000,000 . . . . . 109,400 Married filing separately . . . . . 500,000 . . . . . 54,700 If line 4 is <b>over</b> the amount shown above for your filing status, see instructions.	<b>5</b>	70,300
<b>6</b>	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10 . . . . .	<b>6</b>	46,091
<b>7</b>	<ul style="list-style-type: none"> <li>If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter.</li> <li>If you reported capital gain distributions directly on Schedule 1 (Form 1040), line 13; you reported qualified dividends on Form 1040, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.</li> <li><b>All others:</b> If line 6 is \$191,100 or less (\$95,550 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,822 (\$1,911 if married filing separately) from the result.</li> </ul>	<b>7</b>	11,984
<b>8</b>	Alternative minimum tax foreign tax credit (see instructions) . . . . .	<b>8</b>	
<b>9</b>	Tentative minimum tax. Subtract line 8 from line 7 . . . . .	<b>9</b>	11,984
<b>10</b>	Add Form 1040, line 11a (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 46. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 48. If you used Schedule J to figure your tax on Form 1040, line 11a, refigure that tax without using Schedule J before completing this line (see instructions) . . . . .	<b>10</b>	19,823
<b>11</b>	<b>AMT.</b> Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 45 . . . . .	<b>11</b>	0

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **6251** (2018)

HTA

**Part III Tax Computation Using Maximum Capital Gains Rates**

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.

12	Enter the amount from Form 6251, line 6. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for line 7 . . . . .	12		
13	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 11a, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter . . . . .	13		
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter . . . . .	14		
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter . . . . .	15		
16	Enter the <b>smaller</b> of line 12 or line 15 . . . . .	16		0
17	Subtract line 16 from line 12 . . . . .	17		0
18	If line 17 is \$191,100 or less (\$95,550 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,822 (\$1,911 if married filing separately) from the result . . . . .	18		0
19	Enter: • \$77,200 if married filing jointly or qualifying widow(er), • \$38,600 if single or married filing separately, or • \$51,700 if head of household. . . . .	19		0
20	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 11a, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 10; if zero or less, enter -0-. If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter . . . . .	20		106,391
21	Subtract line 20 from line 19. If zero or less, enter -0- . . . . .	21		0
22	Enter the <b>smaller</b> of line 12 or line 13 . . . . .	22		0
23	Enter the <b>smaller</b> of line 21 or line 22. This amount is taxed at 0% . . . . .	23		0
24	Subtract line 23 from line 22 . . . . .	24		0
25	Enter: • \$425,800 if single • \$239,500 if married filing separately • \$479,000 if married filing jointly or qualifying widow(er) • \$452,400 if head of household . . . . .	25		425,800
26	Enter the amount from line 21 . . . . .	26		0
27	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 11a, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 10; if zero or less, enter -0-. If you are filing Form 2555 or Form 2555-EZ, see instructions for the amount to enter . . . . .	27		106,391
28	Add line 26 and line 27 . . . . .	28		106,391
29	Subtract line 28 from line 25. If zero or less, enter -0- . . . . .	29		319,409
30	Enter the smaller of line 24 or line 29 . . . . .	30		0
31	Multiply line 30 by 15% (0.15) . . . . .	31		0
32	Add lines 23 and 30 . . . . .	32		0
	<b>If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.</b>			
33	Subtract line 32 from line 22 . . . . .	33		0
34	Multiply line 33 by 20% (0.20) . . . . .	34		0
	<b>If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.</b>			
35	Add lines 17, 32, and 33 . . . . .	35		0
36	Subtract line 35 from line 12 . . . . .	36		0
37	Multiply line 36 by 25% (0.25) . . . . .	37		0
38	Add lines 18, 31, 34, and 37 . . . . .	38		0
39	If line 12 is \$191,100 or less (\$95,550 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,822 (\$1,911 if married filing separately) from the result . . . . .	39		0
40	Enter the <b>smaller</b> of line 38 or line 39 here and on line 7. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7 . . . . .	40		0

Form **8582****Passive Activity Loss Limitations**

OMB No. 1545-1008

**2018**Department of the Treasury  
Internal Revenue Service (99)▶ See separate instructions.  
▶ Attach to Form 1040 or Form 1041.▶ Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.Attachment  
Sequence No. **88**

Name(s) shown on return

MUHAMMAD SIDDIQI

Identifying number

-2222

**Part I 2018 Passive Activity Loss****Caution:** Complete Worksheets 1, 2, and 3 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** in the instructions.)

- 1a** Activities with net income (enter the amount from Worksheet 1, column (a)) . . . . .
- 1b** Activities with net loss (enter the amount from Worksheet 1, column (b)) . . . . .
- 1c** Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) . . . . .
- d** Combine lines 1a, 1b, and 1c. . . . .

<b>1a</b>			
<b>1b</b>	(		)
<b>1c</b>	(		)
<b>1d</b>			0

**Commercial Revitalization Deductions From Rental Real Estate Activities**

- 2a** Commercial revitalization deductions from Worksheet 2, column (a) . . . . .
- b** Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) . . . . .
- c** Add lines 2a and 2b . . . . .

<b>2a</b>	(		)
<b>2b</b>	(		)
<b>2c</b>	(		)

**All Other Passive Activities**

- 3a** Activities with net income (enter the amount from Worksheet 3, column (a)) . . . . .
- b** Activities with net loss (enter the amount from Worksheet 3, column (b)) . . . . .
- c** Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) . . . . .
- d** Combine lines 3a, 3b, and 3c. . . . .

<b>3a</b>			
<b>3b</b>	(		)
<b>3c</b>	(		)
<b>3d</b>			0

- 4** Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used . . . . .

<b>4</b>			0
----------	--	--	---

If line 4 is a loss and:

- Line 1d is a loss, go to Part II.
- Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
- Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

- 5** Enter the **smaller** of the loss on line 1d or the loss on line 4 . . . . .
- 6** Enter \$150,000. If married filing separately, see instructions . . . . .
- 7** Enter modified adjusted gross income, but not less than zero (see instructions)

<b>5</b>			0
<b>6</b>			
<b>7</b>		0	

**Note:** If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.

- 8** Subtract line 7 from line 6 . . . . .
- 9** Multiply line 8 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions
- 10** Enter the **smaller** of line 5 or line 9 . . . . .

<b>8</b>		0	
<b>9</b>			0
<b>10</b>			0

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

**Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities****Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

- 11** Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions
- 12** Enter the loss from line 4 . . . . .
- 13** Reduce line 12 by the amount on line 10 . . . . .
- 14** Enter the **smallest** of line 2c (treated as a positive amount), line 11, or line 13 . . . . .

<b>11</b>		0
<b>12</b>		0
<b>13</b>		0
<b>14</b>		0

**Part IV Total Losses Allowed**

- 15** Add the income, if any, on lines 1a and 3a and enter the total . . . . .
- 16** **Total losses allowed from all passive activities for 2018.** Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return . . . . .

<b>15</b>		0
<b>16</b>		0

For Paperwork Reduction Act Notice, see instructions.

Form **8582** (2018)

HTA

Form 8582 (2018)

MUHAMMAD SIDDIQI

2-2222

Page 2

**Caution:** The worksheets must be filed with your tax return. Keep a copy for your records.

**Worksheet 1—For Form 8582, Lines 1a, 1b, and 1c (See instructions.)**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c . . . . . ▶	0	0	0		

**Worksheet 2—For Form 8582, Lines 2a and 2b (See instructions.)**

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b . . . . . ▶	0	0	

**Worksheet 3—For Form 8582, Lines 3a, 3b, and 3c (See instructions.)**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 3a, 3b, and 3c . . . . . ▶	0	0	0		

**Worksheet 4—Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total . . . . . ▶		0	1.00	0	0

**Worksheet 5—Allocation of Unallowed Losses (See instructions.)**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total . . . . . ▶		0	1.00	0

Form 8582 (2018)

MUHAMMAD SIDDIQI

-2222

Page 3

**Worksheet 6—Allowed Losses** (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
<b>Total</b>		0	0	0

**Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules** (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule . . . ▶					
<b>b</b> Net income from form or schedule . . . ▶					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule . . . ▶					
<b>b</b> Net income from form or schedule . . . ▶					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule . . . ▶					
<b>b</b> Net income from form or schedule . . . ▶					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
<b>Total</b>		0	1.00	0	0

Form 8582 (2018)



## Electronic Filing Information (1040)

### Signature Method (Note: When filing status is 'MFJ,' both filers must use PINs.)

- ☒ Practitioner PIN. Use only Section (A) below.  
☐ Self-Select PIN. Use Sections (A) and (B) below.

### PIN Information (Enter information below and then confirm the information on the 'PIN' tab)

(A) Practitioner and Self-Select PIN			
	PIN (5 Digits)	T/S entered	ERO entered
Taxpayer PIN:	22222	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Spouse PIN:		<input type="checkbox"/>	<input type="checkbox"/>
Date signed:	10/15/2019		
ERO PIN:	01234		

(B) Self-Select PIN Only:		
Prior Year PIN	Prior Year AGI	Date of Birth

- ☐ Power of Attorney.  
☐ Personal Representative.  
☐ Signer for minor child.

Type of signer: \_\_\_\_\_  
 Signer for minor's name: \_\_\_\_\_

### EFIN

Enter your 6-digit EFIN number. Note: You must enter the EFIN through the Preparer/ERO Manager.  
 EFIN: 752867

### Submission ID

The Submission ID for this e-File will be computed automatically when an EFIN is entered above. It will only be regenerated if a 'Rejected by EFC' or 'Rejected by Agency' acknowledgement is received and the e-File is recreated.  
 Submission ID 7528672019105s4rsk1n

### Taxpayer Information

Filer's first name MUHAMMAD		Filer's middle initial	Filer's last name SIDDIQI	Filer's suffix
Spouse's first name		Spouse's middle initial	Spouse's last name	Spouse's suffix
Street address 6701 HAVEN HURST CT		Filer's SSN [REDACTED]-2222	Spouse's SSN	
Address continuation		POA, personal rep or c/o addressee name		
City PARKER	State TX	ZIP code 75002	Daytime phone number (214) 837-5055	
Foreign country	Foreign province/county	Foreign postal code	Foreign phone number	
Email address HIBAENTERTAINMENT@MSN.COM		IRS identity protection PIN	Cell phone number	

### ERO

(Enter data in the Preparer Manager)

ERO's name JUAN J WILLIAMS		Check if self-employed <input checked="" type="checkbox"/>	ERO's SSN or PTIN P00756178
Firm's name NVISIONIT FINANCIAL SOLUTIONS, LLC		ERO's EIN 82-4145274	
Address 3010 LBJ FREEWAY, SUITE 1200		Phone 972-919-6151	
City DALLAS	State TX	ZIP code 75234	

### Preparer

(Enter data in the Preparer Manager)

Preparer's name JUAN J WILLIAMS		Non-paid prep type	Check if self-employed <input checked="" type="checkbox"/>	Preparer's PTIN P00756178
Firm's name NVISIONIT FINANCIAL SOLUTIONS, LLC		EIN 82-4145274		
Address 3010 LBJ FREEWAY, SUITE 1200		Phone 972-919-6151		
City DALLAS	State TX	ZIP code 75234	Foreign phone number	
Foreign country	Foreign province/county	Foreign postal code		



2.  
2015 tax return  
and Bank  
Statements for  
Hiba  
Entertainment

Form <b>1065</b> Department of the Treasury Internal Revenue Service		<b>U.S. Return of Partnership Income</b>		OMB No. 1545-0123
For calendar year 2015, or tax year beginning <u>01/01</u> , 2015, ending <u>12/31</u> , 20 <u>15</u>		▶ Information about Form 1065 and its separate instructions is at <a href="http://www.irs.gov/form1065">www.irs.gov/form1065</a> .		<b>2015</b>
A Principal business activity <b>PROMOTERS OF</b>	Type or Print	Name of partnership <b>HIBA ENTERTAINMENT</b>	D Employer identification number <b>75-2865444</b>	
B Principal product or service <b>CONCERT AND G</b>		Number, street, and room or suite no. If a P.O. box, see the instructions. <b>3020 BIG TOWN BLVD</b>	E Date business started <b>01/21/2000</b>	
C Business code number <b>711300</b>		City or town, state or province, country, and ZIP or foreign postal code <b>MESQUITE, TX 75150</b>	F Total assets (see the instructions) <b>\$ 18000</b>	

- G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return  
(6) ☐ Technical termination - also check (1) or (2)
- H Check accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶ \_\_\_\_\_
- I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ▶ \_\_\_\_\_
- J Check if Schedules C and M-3 are attached ☐

**Caution.** Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

Income	1a	Gross receipts or sales . . . . .	1a	35000	
	b	Returns and allowances . . . . .	1b		
	c	Balance. Subtract line 1b from line 1a . . . . .	1c		35000
	2	Cost of goods sold (attach Form 1125-A) . . . . .	2		
	3	Gross profit. Subtract line 2 from line 1c . . . . .	3		35000
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement) . . . . .	4		
	5	Net farm profit (loss) (attach Schedule F (Form 1040)) . . . . .	5		
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) . . . . .	6		
Deductions (see the instructions for limitations)	7	Other income (loss) (attach statement) . . . . .	7		
	8	<b>Total income (loss).</b> Combine lines 3 through 7 . . . . .	8		35000
	9	Salaries and wages (other than to partners) (less employment credits) . . . . .	9		
	10	Guaranteed payments to partners . . . . .	10		
	11	Repairs and maintenance . . . . .	11		
	12	Bad debts . . . . .	12		
	13	Rent . . . . .	13		
	14	Taxes and licenses . . . . .	14		
	15	Interest . . . . .	15		
	16a	Depreciation (if required, attach Form 4562) . . . . .	16a		
	b	Less depreciation reported on Form 1125-A and elsewhere on return . . . . .	16b		
	16c		16c		
	17	Depletion ( <b>Do not deduct oil and gas depletion.</b> ) . . . . .	17		
	18	Retirement plans, etc. . . . .	18		
19	Employee benefit programs . . . . .	19			
20	Other deductions (attach statement) . . . . .	20		73191	
21	<b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20 . . . . .	21		73191	
22	<b>Ordinary business income (loss).</b> Subtract line 21 from line 8 . . . . .	22		-38191	

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.			
	▶ Signature of general partner or limited liability company member manager		▶ Date <u>06/14/2016</u>	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶		<u>06/14/2016</u>	
	Firm's address ▶			Firm's EIN ▶ - Phone no. - -

For Paperwork Reduction Act Notice, see separate instructions.  
QNA

Form **1065** (2015)

HIBA ENTERTAINMENT

75-2865444

Form 1065 (2015)

Page 2

**Schedule B Other Information**

<b>1</b>	What type of entity is filing this return? Check the applicable box:	<b>Yes</b>	<b>No</b>		
<b>a</b>	<input type="checkbox"/> Domestic general partnership				
<b>b</b>	<input type="checkbox"/> Domestic limited partnership				
<b>c</b>	<input checked="" type="checkbox"/> Domestic limited liability company				
<b>d</b>	<input type="checkbox"/> Domestic limited liability partnership				
<b>e</b>	<input type="checkbox"/> Foreign partnership				
<b>f</b>	<input type="checkbox"/> Other ▶				
<b>2</b>	At any time during the tax year, was any partner in the partnership a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner), or a nominee or similar person?		X		
<b>3</b>	At the end of the tax year:				
<b>a</b>	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X		
<b>b</b>	Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X		
<b>4</b>	At the end of the tax year, did the partnership:				
<b>a</b>	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below		X		
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation		
<b>b</b>	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X		
(i) Name of Entity		(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
<b>5</b>	Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii) for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details	<b>Yes</b>	<b>No</b>		
			X		
<b>6</b>	Does the partnership satisfy <b>all four</b> of the following conditions?				
<b>a</b>	The partnership's total receipts for the tax year were less than \$250,000.				
<b>b</b>	The partnership's total assets at the end of the tax year were less than \$1 million.				
<b>c</b>	Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.				
<b>d</b>	The partnership is not filing and is not required to file Schedule M-3	X			
	If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065; or Item L on Schedule K-1.				
<b>7</b>	Is this partnership a publicly traded partnership as defined in section 469(k)(2)?		X		
<b>8</b>	During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X		
<b>9</b>	Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		X		
<b>10</b>	At any time during calendar year 2015, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country. ▶		X		

QNA

Form 1065 (2015)

HIBA ENTERTAINMENT

75-2865444

Form 1065 (2015)

Page **3**

**Schedule B Other Information (continued)**

	Yes	No
<b>11</b> At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions . . . . .		X
<b>12a</b> Is the partnership making, or had it previously made (and not revoked), a section 754 election? . . . . . See instructions for details regarding a section 754 election.		X
<b>b</b> Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions . . . . .		X
<b>c</b> Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions . . . . .		X
<b>13</b> Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) . . . . . <input type="checkbox"/>		
<b>14</b> At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property? . . . . .		X
<b>15</b> If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the number of Forms 8858 attached. See instructions ▶ <b>0</b>		
<b>16</b> Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. ▶		X
<b>17</b> Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. ▶ <b>0</b>		
<b>18a</b> Did you make any payments in 2015 that would require you to file Form(s) 1099? See instructions . . . . .		X
<b>b</b> If "Yes," did you or will you file required Form(s) 1099? . . . . .		
<b>19</b> Enter the number of Form(s) 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return. ▶ <b>0</b>		
<b>20</b> Enter the number of partners that are foreign governments under section 892. ▶ <b>0</b>		

**Designation of Tax Matters Partner** (see instructions)

Enter below the general partner or member-manager designated as the tax matters partner (TMP) for the tax year of this return:

Name of designated TMP ▶	Identifying number of TMP ▶
If the TMP is an entity, name of TMP representative ▶	Phone number of TMP ▶
Address of designated TMP ▶	

QNA

Form **1065** (2015)

HIBA ENTERTAINMENT

75-2865444

Form 1065 (2015)

Page 4

Schedule K		Partners' Distributive Share Items	Total amount	
Income (Loss)	1	Ordinary business income (loss) (page 1, line 22)	1	-38191
	2	Net rental real estate income (loss) (attach Form 8825)	2	
	3a	Other gross rental income (loss)	3a	
	b	Expenses from other rental activities (attach statement)	3b	
	c	Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4	Guaranteed payments	4	
	5	Interest income	5	
	6	Dividends: a Ordinary dividends	6a	
	b	Qualified dividends	6b	
	7	Royalties	7	
	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
Deductions	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b	Collectibles (28%) gain (loss)	9b	
	c	Unrecaptured section 1250 gain (attach statement)	9c	
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type ▶	11	
	12	Section 179 deduction (attach Form 4562)	12	
	13a	Contributions	13a	
	b	Investment interest expense	13b	
	c	Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
	d	Other deductions (see instructions) Type ▶	13d	
	Self-Employment	14a	Net earnings (loss) from self-employment	14a
b		Gross farming or fishing income	14b	
c		Gross nonfarm income	14c	
Credits	15a	Low-income housing credit (section 42(j)(5))	15a	
	b	Low-income housing credit (other)	15b	
	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d	Other rental real estate credits (see instructions) Type ▶	15d	
	e	Other rental credits (see instructions) Type ▶	15e	
	f	Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a	Name of country or U.S. possession ▶		
	b	Gross income from all sources	16b	
	c	Gross income sourced at partner level	16c	
		Foreign gross income sourced at partnership level		
	d	Passive category ▶ e General category ▶ f Other ▶	16f	
		Deductions allocated and apportioned at partner level		
	g	Interest expense ▶ h Other ▶	16h	
		Deductions allocated and apportioned at partnership level to foreign source income		
	i	Passive category ▶ j General category ▶ k Other ▶	16k	
	l	Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16l	
Alternative Minimum Tax (AMT) Items	m	Reduction in taxes available for credit (attach statement)	16m	
	n	Other foreign tax information (attach statement)		
	17a	Post-1986 depreciation adjustment	17a	
	b	Adjusted gain or loss	17b	
	c	Depletion (other than oil and gas)	17c	
	d	Oil, gas, and geothermal properties—gross income	17d	
Other Information	e	Oil, gas, and geothermal properties—deductions	17e	
	f	Other AMT items (attach statement)	17f	
	18a	Tax-exempt interest income	18a	
	b	Other tax-exempt income	18b	
	c	Nondeductible expenses	18c	
	19a	Distributions of cash and marketable securities	19a	
	b	Distributions of other property	19b	
	20a	Investment income	20a	
	b	Investment expenses	20b	
	c	Other items and amounts (attach statement)		

QNA

Form 1065 (2015)

HIBA ENTERTAINMENT

75-2865444

Form 1065 (2015)

Page 5

**Analysis of Net Income (Loss)**

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16l	1	-38191				
2	Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a	General partners						
b	Limited partners						

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)				
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach statement)				
14	Total assets				
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)				
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach statement)				
21	Partners' capital accounts				
22	Total liabilities and capital				

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note. The partnership may be required to file Schedule M-3 (see instructions).

1	Net income (loss) per books	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):	a	Tax-exempt interest \$
3	Guaranteed payments (other than health insurance)	7	Deductions included on Schedule K, lines 1 through 13d, and 16l, not charged against book income this year (itemize):
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16l (itemize):	a	Depreciation \$
a	Depreciation \$	8	Add lines 6 and 7
b	Travel and entertainment \$	9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5
5	Add lines 1 through 4		

**Schedule M-2 Analysis of Partners' Capital Accounts**

1	Balance at beginning of year	6	Distributions: a Cash
2	Capital contributed: a Cash	b	Property
	b Property	7	Other decreases (itemize):
3	Net income (loss) per books	8	Add lines 6 and 7
4	Other increases (itemize):	9	Balance at end of year. Subtract line 8 from line 5
5	Add lines 1 through 4		

Form **1125-A**

**Cost of Goods Sold**

(Rev. December 2012)  
Department of the Treasury  
Internal Revenue Service

► Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.  
► Information about Form 1125-A and its instructions is at [www.irs.gov/form1125a](http://www.irs.gov/form1125a).

OMB No. 1545-2225

Name		Employer identification number
HIBA ENTERTAINMENT		75-2865444
1	Inventory at beginning of year . . . . .	1
2	Purchases . . . . .	2
3	Cost of labor . . . . .	3
4	Additional section 263A costs (attach schedule) . . . . .	4
5	Other costs (attach schedule) . . . . .	5
6	<b>Total.</b> Add lines 1 through 5 . . . . .	6
7	Inventory at end of year . . . . .	7
8	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions) . . . . .	8
9a Check all methods used for valuing closing inventory:		
(i) <input type="checkbox"/> Cost		
(ii) <input type="checkbox"/> Lower of cost or market		
(iii) <input type="checkbox"/> Other (Specify method used and attach explanation.) ►		
b	Check if there was a writedown of subnormal goods . . . . .	<input type="checkbox"/>
c	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) . . . . .	<input type="checkbox"/>
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO . . . . .	9d
e	If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

HIBA ENTERTAINMENT

75-2865444

**Worksheet for Figuring Net Earnings (Loss) From Self-Employment**

<b>1a</b>	Ordinary business income (loss) (Schedule K, line 1) . . . . .	<b>1a</b>	- 38191		
<b>b</b>	Net income (loss) from certain rental real estate activities (see instructions) . . .	<b>1b</b>			
<b>c</b>	Other net rental income (loss) (Schedule K, line 3c) . . . . .	<b>1c</b>			
<b>d</b>	Net loss from Form 4797, Part II, line 17, included on line 1a above. Enter as a positive amount	<b>1d</b>			
<b>e</b>	Combine lines 1a through 1d . . . . .	<b>1e</b>	- 38191		
<b>2</b>	Net gain from Form 4797, Part II, line 17, included on line 1a above . . . . .	<b>2</b>			
<b>3a</b>	Subtract line 2 from line 1e. If line 1e is a loss, increase the loss on line 1e by the amount on line 2	<b>3a</b>	- 38191		
<b>b</b>	Part of line 3a allocated to limited partners, estates, trusts, corporations, exempt organizations, and IRAs . . . . .	<b>3b</b>			
<b>c</b>	Subtract line 3b from line 3a. If line 3a is a loss, reduce the loss on line 3a by the amount on line 3b. Include each individual general partner's share in box 14 of Schedule K-1, using code A . . . . .			<b>3c</b>	- 38191
<b>4a</b>	Guaranteed payments to partners (Schedule K, line 4) derived from a trade or business as defined in section 1402(c) (see instructions) . . . . .	<b>4a</b>			
<b>b</b>	Part of line 4a allocated to individual limited partners for other than services and to estates, trusts, corporations, exempt organizations, and IRAs . . . . .	<b>4b</b>			
<b>c</b>	Subtract line 4b from line 4a. Include each individual general partner's share and each individual limited partner's share in box 14 of Schedule K-1, using code A . . . . .			<b>4c</b>	
<b>5</b>	Net earnings (loss) from self-employment. Combine lines 3c and 4c. Enter here and on Schedule K, line 14a	<b>5</b>			- 38191

QNA



1065 SUPPORTING STATEMENTS FOR 75-2865444

\*\*\*\* SCHEDULE of Deductions - Other:

<u>Description</u>	<u>Amount</u>
MEALS AND ENTERTAINMENT	2250
SECURITY	6349
ORGANIZATION EXPENSES	9920
CONTRACT LABOR	6875
TRAVEL	11400
LEASE OF CONCERT HALL	33897
AUTO EXPENSE	2500
	-----
	73191



December 30, 2017 through January 31, 2018

Account Number: [REDACTED] 0290

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
01/08	Deposit 938595795	\$6,600.00
<b>Total Deposits and Additions</b>		<b>\$6,600.00</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1118 ^		01/08	\$30,000.00
1120 * ^		01/17	1,050.00
<b>Total Checks Paid</b>			<b>\$31,050.00</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
01/02	Card Purchase 12/28 Amc Stonebriar 24 #0260 Frisco TX Card 4378	\$34.08
01/02	Card Purchase 12/30 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	0.99
01/02	Card Purchase With Pin 12/31 Racetrac 99 Plano TX Card 4378	21.97 ✓
01/04	Card Purchase With Pin 01/04 Shell Service Statio Farmers Branc TX Card 4378	27.86 ✓
01/09	Recurring Card Purchase 01/09 Facebk 5P6Egdss42 650-5434800 CA Card 4378	2.82 ✓
01/09	Recurring Card Purchase 01/09 Facebk 4P6Egdss42 650-5434800 CA Card 4378	1.09 ✓
01/10	Card Purchase 01/09 Dallas CO Motorvehicle Dallas TX Card 4378	74.75 ✓
01/10	Card Purchase 01/09 JP Morgan Ch*Aset Fee Dallas TX Card 4378	3.50 ✓
01/11	Card Purchase 01/09 Collin CO TX Clerk P LA Carrollton TX Card 4378	1.86 ✓
01/11	Card Purchase 01/09 Collin CO TX Clerk P LA Mckinney TX Card 4378	81.00 ✓
01/11	Card Purchase With Pin 01/11 Wal-Mart Super Center Lucas TX Card 4378	46.86 ✓
01/16	Card Purchase 01/13 Racetrac616 00006163 Plano TX Card 4378	20.00 ✓
01/16	Card Purchase With Pin 01/13 Kroger So 2608 W Fm 54 Wylie TX Card 4378	41.98 ✓
01/16	Card Purchase With Pin 01/13 Kroger So 2608 W Fm 54 Wylie TX Card 4378	4.32 ✓
01/17	ATM Withdrawal 01/17 161 W Spring Creek Pkwy Plano TX Card 4378	500.00 ✓
01/17	Card Purchase With Pin 01/17 Murphy Express 8722 Allen TX Card 4378	8.08 ✓
01/18	Card Purchase 01/17 Starbucks Store 24470 Lucas TX Card 4378	3.95 ✓
01/18	Card Purchase 01/17 Wendy's #11493 Lucas TX Card 4378	3.55 ✓
01/18	Card Purchase With Pin 01/18 Quiktrip Dallas TX Card 4378	14.42 ✓
01/19	Card Purchase 01/18 Br Factory US 4126 Fort Worth TX Card 4378	33.12 ✓
01/22	Card Purchase 01/18 National Wireless Dallas TX Card 4378	35.00 ✓
01/22	Card Purchase 01/20 Chuck E Cheese 597 Allen TX Card 4378	12.00 ✓
01/22	Card Purchase 01/21 Yummy Burgers & Bbq Allen TX Card 4378	25.17 ✓
01/22	Card Purchase With Pin 01/21 Kroger So 536 Centenni Richardson TX Card 4378	59.57 ✓
01/22	Non-Chase ATM Withdraw 01/22 10084 CR 448 Princeton TX Card 4378	103.00 ✓
01/25	Card Purchase 01/23 Too Thai Street Eats Carrollton TX Card 4378	90.05 ✓
01/29	Card Purchase 01/27 Bjs Restaurants 439 Plano TX Card 4378	80.33 ✓
01/29	Card Purchase With Pin 01/27 7-Eleven Murphy TX Card 4378	5.69 ✓



December 30, 2017 through January 31, 2018

Account Number: [REDACTED] 0290

## ATM & DEBIT CARD WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
01/29	Card Purchase With Pin 01/27 7-Eleven Murphy TX Card 4378	4.99
01/29	Card Purchase With Pin 01/27 7-Eleven 33654 Murphy TX Card 4378	39.99
01/31	Card Purchase 01/30 Apl* iTunes.Com/Bill 866-712-7753 CA Card 4378	0.99
<b>Total ATM &amp; Debit Card Withdrawals</b>		<b>\$1,382.98</b>

## ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$603.00
Total Card Purchases	\$779.98
Total Card Deposits & Credits	\$0.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$603.00
Total Card Purchases	\$779.98
Total Card Deposits & Credits	\$0.00

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
01/02	Quickpay With Zelle Payment To Millan 6787217588	\$1,000.00 ✓
01/02	01/01 Payment To Chase Card Ending IN 3191	500.00 ✓
01/09	Quickpay With Zelle Payment To Millan 6809627283	600.00 ✓
01/12	01/12 Payment To Chase Card Ending IN 3191	500.00 ✓
01/16	Quickpay With Zelle Payment To Guy Cannon 6826156673	500.00 ✓
01/16	Quickpay With Zelle Payment To Laura Moonan 6828861242	1.00 ✓
01/22	Farmers Ins EFT Pymt PPD ID: 1952575893	765.49 ✓
01/23	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24 ✓
01/25	Stream Energy Utility 2125379 Web ID: 0000007041	27.24 ✓
01/25	Kubra Stream Web Utility 2141053 Web ID: 0000007041	2.95 ✓
01/29	Quickpay With Zelle Payment To Millan 6857015588	300.00 ✓
<b>Total Electronic Withdrawals</b>		<b>\$4,756.92</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
01/22	01/22 Withdrawal	\$900.00
<b>Total Other Withdrawals</b>		<b>\$900.00</b>

## FEES

DATE	DESCRIPTION	AMOUNT
01/22	Non-Chase ATM Fee-With	\$2.50
<b>Total Fees</b>		<b>\$2.50</b>



December 30, 2017 through January 31, 2018

Account Number: [REDACTED] 0290

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
01/02	\$30,234.01	01/12	5,494.27	01/22	1,411.12
01/04	30,206.15	01/16	4,926.97	01/23	850.88
01/08	6,806.15	01/17	3,368.89	01/25	730.64
01/09	6,202.24	01/18	3,346.97	01/29	299.64
01/10	6,123.99	01/19	3,313.85	01/31	298.65
01/11	5,994.27				

## SERVICE CHARGE SUMMARY

You were not charged a monthly service fee this month. Your monthly service fee can continue to be waived in five different ways during any statement period:

- Maintain an average daily balance of \$7,500.00. Your average daily balance was \$10,675.00. OR
- Maintain a relationship balance of \$25,000.00 or more during the statement period. Your relationship balance was \$11,629.00. OR
- Link a qualifying personal checking account to your Chase BusinessSelect Checking account. Your Premier Plus personal checking account is linked. OR
- Spend at least \$1,000.00 on a linked Chase Business Credit Card. You spent \$0.00. OR
- Pay at least \$50.00 in qualifying checking-related services or fees. You paid \$2.50.

See your Account Rules and Regulations or stop in to see a banker today to find out more.

### TRANSACTIONS FOR SERVICE FEE CALCULATION

	NUMBER OF TRANSACTIONS
Checks Paid / Debits	38
Deposits / Credits	1
Deposited Items	1
<b>Transaction Total</b>	<b>40</b>

### SERVICE FEE CALCULATION

	AMOUNT
Service Fee	\$15.00
Service Fee Credit	-\$15.00
<b>Net Service Fee</b>	<b>\$0.00</b>
Excessive Transaction Fees (Above 200)	\$0.00
<b>Total Service Fees</b>	<b>\$0.00</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A.  
P O Box 659754  
San Antonio, TX 78265-9754

February 01, 2018 through February 28, 2018

Account Number: [REDACTED] 0290

00030948 DRE 201 142 06018 NNNNNNNNNN T 1 000000000 60 0000

HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-242-7338  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-888-622-4273  
International Calls: 1-713-262-1679

#### We clarified when we charge the Returned Item fee for Overdraft in our Additional Banking Services and Fees disclosure

- We **won't charge** a Returned Item fee for Overdraft for any item that is \$5 or less, even if your account balance at the end of the business day is overdrawn
- We **will charge** a Returned Item fee for Overdraft for any item that is more than \$5, even if your account balance at the end of the business day is overdrawn

You can see these updates in the Additional Banking Services and Fees by signing in to chase.com. You can also call us or visit a branch with any questions.

#### CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$298.65</b>
Deposits and Additions	6	21,502.00
ATM & Debit Card Withdrawals	23	-1,073.59
Electronic Withdrawals	4	-16,851.00
Fees	2	-53.75
<b>Ending Balance</b>	<b>35</b>	<b>\$3,822.31</b>

The monthly service fee for this account was waived because you used at least \$50.00 in other checking services during the statement period.

#### DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
02/02	Quickpay With Zelle Payment From Muhammad N Siddiqi 6873727863	\$1.00
02/09	ATM Cash Deposit 02/09 161 W Spring Creek Pkwy Plano TX Card 4378	500.00
02/14	Paymentech Deposit 6241464 CCD ID: 1020401225	1.00
02/20	Remote Online Deposit 1	4,000.00
02/20	Deposit 929602617	2,000.00
02/23	Deposit 853410632	15,000.00
<b>Total Deposits and Additions</b>		<b>\$21,502.00</b>



February 01, 2018 through February 28, 2018

Account Number: [REDACTED] 50290

### ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
02/01	Card Purchase 01/31 Ace Parking 3713 Dallas TX Card 4378	\$5.00 ✓
02/01	Card Purchase With Pin 02/01 Racetrac526 Plano TX Card 4378	17.86 ✓
02/05	Card Purchase 02/02 Tuscany Pizza Grand Prarie TX Card 4378	37.01 ✓
02/05	Card Purchase With Pin 02/02 Kroger #0 2608 W Fm 54 Wylie TX Card 4378	59.92 ✓
02/05	Card Purchase 02/03 Target 00025502 Wylie TX Card 4378	105.78 ✓
02/06	Card Purchase With Pin 02/05 Wal-Mart Wal-Mart Sup Wylie TX Card 4378	6.68 ✓
02/07	Card Purchase With Pin 02/06 Kroger 11565A State Hw Sugar Land TX Card 4378	55.07 ✓
02/08	Card Purchase 02/07 91272 Dallas On Street Dallas TX Card 4378	1.00 ✓
02/12	Card Purchase 02/10 Starbucks Store 06421 Conroe TX Card 4378	8.01 ✓
02/12	Card Purchase 02/10 Starbucks Store 06421 Conroe TX Card 4378	2.98 ✓
02/12	Card Purchase With Pin 02/11 Kroger 2222 I-45 Conroe TX Card 4378	40.44 ✓
02/12	Card Purchase With Pin 02/11 Wal-Mart #5672 Lucas TX Card 4378	23.40 ✓
02/12	Card Purchase With Pin 02/12 Racetrac 93 Allen TX Card 4378	11.92 ✓
02/15	Card Purchase 02/13 Mcdonald's M7273 of TX Murphy TX Card 4378	2.58 ✓
02/15	Card Purchase 02/14 Tmobile*Postpaid Tel 800-937-8997 WA Card 4378	103.44 ✓
02/20	Card Purchase 02/16 Tuscany Pizza Grand Prarie TX Card 4378	75.62 ✓
02/20	Card Purchase With Pin 02/17 Racetrac 99 Plano TX Card 4378	7.77 ✓
02/20	Card Purchase 02/20 Tmobile*Postpaid Fdp 800-937-8997 WA Card 4378	413.75 ✓
02/21	Card Purchase 02/21 Subway 00102194 Addison TX Card 4378	7.57 ✓
02/21	Card Purchase With Pin 02/21 Quiktrip Corp Wylie TX Card 4378	56.28 ✓
02/26	Card Purchase 02/23 Starbucks Store 11296 Dallas TX Card 4378	4.22 ✓
02/26	Card Purchase With Pin 02/24 Racetrac 93 Allen TX Card 4378	9.99 ✓
02/26	Card Purchase With Pin 02/25 Shell Service S Allen TX Card 4378	17.30 ✓
Total ATM & Debit Card Withdrawals		\$1,073.59

### ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$1,073.59
Total Card Deposits & Credits	\$500.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$1,073.59
Total Card Deposits & Credits	\$500.00

### ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
02/21	Quickpay With Zelle Payment To Bito Bhai 6921044682	\$1.00
02/21	Quickpay With Zelle Payment To Bito Bhai 6921217766	500.00
02/23	Paymentech Fin ADJ 6241464 CCD ID: 1020401225	100.00
02/26	02/26 Domestic Wire Transfer Via: Tib Dallas/111010170 A/C: Grand Ridge National Bank Ref: Further Credit Vibrant Media Group LLC 1069 W Golf Rd Hoffman Estates, IL 60169Acct 0020008413 Imad: 0226B1Qgc08C002132 Trn: 5797800054Es	16,250.00
Total Electronic Withdrawals		\$16,851.00



February 01, 2018 through February 28, 2018

Account Number: [REDACTED] 0290

## FEES

DATE	DESCRIPTION	AMOUNT
02/26	Domestic Wire Fee	\$35.00
02/28	Cash Deposit Immediate	18.75
<b>Total Fees</b>		<b>\$53.75</b>

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
02/01	\$275.79	02/08	11.33	02/20	5,822.42
02/02	276.79	02/09	511.33	02/21	5,257.57
02/05	74.08	02/12	424.58	02/23	20,157.57
02/06	67.40	02/14	425.58	02/26	3,841.06
02/07	12.33	02/15	319.56	02/28	3,822.31

## SERVICE CHARGE SUMMARY

### TRANSACTIONS FOR SERVICE FEE CALCULATION

	NUMBER OF TRANSACTIONS
Checks Paid / Debits	25
Deposits / Credits	3
Deposited Items	3
<b>Transaction Total</b>	<b>31</b>

### SERVICE FEE CALCULATION

	AMOUNT
Service Fee	\$0.00
Service Fee Credit	\$0.00
<b>Net Service Fee</b>	<b>\$0.00</b>
Excessive Transaction Fees (Above 200)	\$0.00
<b>Total Service Fees</b>	<b>\$0.00</b>

### CASH PROCESSING

	AMOUNT
Cash Deposits Immediate Verification	\$15,000.00
Cash Deposits Post Verification/Night Drop	\$0.00
<b>Cash Deposits Total</b>	<b>\$15,000.00</b>
Cash Deposits Allowed	\$7,500.00
<b>Excess Cash Deposits</b>	<b>\$7,500.00</b>

Excess Immediate (\$7,500 At \$2.50/\$1,000)	\$18.75
<b>Total Cash Deposit And Change Order Fees</b>	<b>\$18.75</b>



February 01, 2018 through February 28, 2018

Account Number: [REDACTED] 290

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

March 01, 2018 through March 30, 2018

Account Number: [REDACTED] 60290

00030641 DRE 201 142 09018 NNNNNNNNNN T 1 000000000 60 0000

HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

#### CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-242-7338**  
Deaf and Hard of Hearing: **1-800-242-7383**  
Para Espanol: **1-888-622-4273**  
International Calls: **1-713-262-1679**



### We updated our Deposit Account Agreement

The following changes were made March 11, 2018:

We published an updated version of our Deposit Account Agreement. You can get the latest agreement at a branch or by request when you call us. Here's what you should know:

- We clarified that if the amount written on your deposit ticket is different from the total deposit you present, we can adjust your account for the difference. (General Account Terms, Section A, Deposit records and receipts)
- You can now request a stop payment on a check through the Chase Mobile<sup>®</sup> app. You can also still do this on chase.com, over the phone or in a branch. (General Account Terms, Section B, Stop payments)
- We're starting to use a new payment network that allows businesses to send you real-time payments when you provide your account and routing numbers. When you accept a real-time payment, you confirm that you're not acting on the behalf of someone who is not a U.S. citizen or resident. (General Account Terms, Section I, Rules governing your account)
- We updated the language to clarify how to place a stop payment on electronic funds transfers. (Electronic Funds Transfer Service Terms, Section G, Preauthorized (recurring) transfers and stop payments)

Please call us at the number on this statement if you have any questions.

### CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$3,822.31</b>
Deposits and Additions	8	40,564.94
Checks Paid	2	-2,092.61
ATM & Debit Card Withdrawals	9	-560.54
Electronic Withdrawals	5	-4,201.93
Fees	2	-20.00
<b>Ending Balance</b>	<b>26</b>	<b>\$37,512.17</b>



March 01, 2018 through March 30, 2018  
Account Number: [REDACTED] 0290

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
03/02	Paymentech Deposit 6241464 CCD ID: 1020401225	\$2,500.00
03/02	Quickpay With Zelle Payment From Guy G Cannon 6946341364	500.00
03/13	Deposit 958113839	5,000.00
03/15	Deposit 943961105	8,000.00
03/16	Card Purchase Return 03/15 Sally Beauty #3891 Wylie TX Card 4378	64.94
03/26	Remote Online Deposit 1	10,000.00
03/28	Deposit 968482180	4,500.00
03/29	Fedwire Credit Via: Wells Fargo Bank/121000248 B/O: Amin Dhanani US Ref: Chase Nyc/Ctr/Bnf=Hiba Entertainment Inc Mesquite, TX 751502412/Ac-000 000031438 Rfb=Ow00000238198474 Obi= Dabangg Tour Vip Tickets For Amin D Hanani Imad: 03291B7032R027596 Trn: 9098709088Ff	10,000.00

**Total Deposits and Additions** **\$40,564.94**

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1133 ^		03/27	\$1,060.61
1135 * ^		03/26	1,032.00

**Total Checks Paid** **\$2,092.61**

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/01	Card Purchase 02/28 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	\$0.99
03/01	Card Purchase With Pin 03/01 Sally Beauty #38 3400 Wylie TX Card 4378	132.59
03/05	Card Purchase 03/02 I45 Quick Stop Streetman TX Card 4378	64.07 ✓
03/05	Card Purchase With Pin 03/04 7-Eleven Richardson TX Card 4378	3.59 ✓
03/07	Card Purchase With Pin 03/07 Shell Service Station Addison TX Card 4378	13.85 ✓
03/09	Card Purchase With Pin 03/09 Racetrac 93 Allen TX Card 4378	17.86 ✓
03/16	Card Purchase 03/15 Royal Sweets & Fast Foo Plano TX Card 4378	60.94 ✓
03/19	Card Purchase With Pin 03/17 Wm Superc Wal-Mart Sup Lucas TX Card 4378	226.03 ✓
03/23	Card Purchase 03/22 Mattito's - Irving Irving TX Card 4378	40.62
<b>Total ATM &amp; Debit Card Withdrawals</b>		<b>\$560.54</b>

## ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$560.54
Total Card Deposits & Credits	\$64.94

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$560.54
Total Card Deposits & Credits	\$64.94



March 01, 2018 through March 30, 2018  
Account Number: [REDACTED] 0290

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/02	Paymenttech Fee 6241464 CCD ID: 1020401225	\$34.95
03/19	Quickpay With Zelle Payment To Millan 6990306692	200.00
03/20	Simmons Bank - L Tel Pmts Zy67 Tel ID: 1710162300	2,406.74
03/23	03/23 Payment To Chase Card Ending IN 3191	1,000.00
03/26	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
<b>Total Electronic Withdrawals</b>		<b>\$4,201.93</b>

## FEES

DATE	DESCRIPTION	AMOUNT
03/29	Domestic Incoming Wire Fee	\$15.00
03/30	Cash Deposit Immediate	5.00
<b>Total Fees</b>		<b>\$20.00</b>

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
03/01	\$3,688.73	03/15	19,554.41	03/26	24,092.78
03/02	6,653.78	03/16	19,558.41	03/27	23,032.17
03/05	6,586.12	03/19	19,132.38	03/28	27,532.17
03/07	6,572.27	03/20	16,725.64	03/29	37,517.17
03/09	6,554.41	03/23	15,685.02	03/30	37,512.17
03/13	11,554.41				

## SERVICE CHARGE SUMMARY

You were not charged a monthly service fee this month. Your monthly service fee can continue to be waived in five different ways during any statement period:

- Maintain an average daily balance of \$7,500.00. Your average daily balance was \$14,785.00. OR
- Maintain a relationship balance of \$25,000.00 or more during the statement period. Your relationship balance was \$13,662.00. OR
- Link a qualifying personal checking account to your Chase BusinessSelect Checking account. Your Premier Plus personal checking account is linked. OR
- Spend at least \$1,000.00 on a linked Chase Business Credit Card. You spent \$0.00. OR
- Pay at least \$50.00 in qualifying checking-related services or fees. You paid \$20.00.

See your Account Rules and Regulations or stop in to see a banker today to find out more.

### TRANSACTIONS FOR SERVICE FEE CALCULATION

	NUMBER OF TRANSACTIONS
Checks Paid / Debits	14
Deposits / Credits	5
Deposited Items	2
<b>Transaction Total</b>	<b>21</b>

### SERVICE FEE CALCULATION

	AMOUNT
Service Fee	\$15.00
Service Fee Credit	-\$15.00
<b>Net Service Fee</b>	<b>\$0.00</b>
Excessive Transaction Fees (Above 200)	\$0.00
<b>Total Service Fees</b>	<b>\$0.00</b>



March 01, 2018 through March 30, 2018  
Account Number: [REDACTED] 0290

**SERVICE CHARGE SUMMARY** (continued)

CASH PROCESSING	AMOUNT
Cash Deposits Immediate Verification	\$9,500.00
Cash Deposits Post Verification/Night Drop	\$0.00
<b>Cash Deposits Total</b>	<b>\$9,500.00</b>
Cash Deposits Allowed	\$7,500.00
<b>Excess Cash Deposits</b>	<b>\$2,000.00</b>
 Excess Immediate (\$2,000 At \$2.50/\$1,000)	 \$5.00
<b>Total Cash Deposit And Change Order Fees</b>	<b>\$5.00</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

March 31, 2018 through April 30, 2018  
Account Number: [REDACTED] 290

00030230 DRE 201 142 12118 YNNNNNNNNNN T 1 000000000 60 0000

HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

# CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-242-7338**  
Deaf and Hard of Hearing: **1-800-242-7383**  
Para Espanol: **1-888-622-4273**  
International Calls: **1-713-262-1679**



## CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$37,512.17</b>
Deposits and Additions	6	58,095.50
Checks Paid	1	-2,000.00
ATM & Debit Card Withdrawals	23	-11,899.12
Electronic Withdrawals	8	-4,645.88
<b>Ending Balance</b>	<b>38</b>	<b>\$77,062.67</b>

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
04/03	JPMorgan Chase Auth Crdt PPD ID: 9200502233	\$0.44
04/03	JPMorgan Chase Auth Crdt PPD ID: 9200502233	0.06
04/05	Deposit 969777787	1,000.00
04/06	Deposit 905330787	6,495.00
04/19	Paymentech Deposit 6241464 CCD ID: 1020401225	600.00
04/25	Deposit	50,000.00
<b>Total Deposits and Additions</b>		<b>\$58,095.50</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1119 ^		04/30	\$2,000.00
<b>Total Checks Paid</b>			<b>\$2,000.00</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

^ An image of this check may be available for you to view on Chase.com.



*[Handwritten signature]*

March 31, 2018 through April 30, 2018  
Account Number: [REDACTED] 0290

### ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
04/02	Card Purchase 03/30 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	\$0.99
04/09	Card Purchase 04/06 Movenpick Hotel Kara Karachi Card 4378 Pk Rupee 234914.59 X 0.008653528 (Exchg Rte)	2,032.84 ✓
04/09	Foreign Exch Rt ADJ Fee 04/06 Movenpick Hotel Kara Karachi Card 4378	60.98 ✓
04/09	Card Purchase 04/06 Islamabd Marriott Hote Islamabad Card 4378 Pk Rupee 55000.00 X 0.008653455 (Exchg Rte)	475.94 ✓
04/09	Foreign Exch Rt ADJ Fee 04/06 Islamabd Marriott Hote Islamabad Card 4378	14.27 ✓
04/09	Card Purchase 04/07 Brinkster 480-388-3777 AZ Card 4378	30.06 ✓
04/09	Card Purchase 04/08 Talha Jewellers Rawalpindi Card 4378 Pk Rupee 800000.00 X 0.008653513 (Exchg Rte)	6,922.81
04/09	Foreign Exch Rt ADJ Fee 04/08 Talha Jewellers Rawalpindi Card 4378	207.68 ✓
04/13	Card Purchase 04/12 Fsi*Frontier 800-921-8101 CT Card 4378	210.52 ✓
04/16	Card Purchase 04/14 Mcdonald's F20727 Dfw Airport TX Card 4378	10.77 ✓
04/16	Card Purchase With Pin 04/14 Foxnewsst2513 Dallas TX Card 4378	3.99 ✓
04/16	Card Purchase 04/15 Au Bon Pain A-34 Dallas TX Card 4378	11.13 ✓
04/16	Card Purchase 04/15 Dfw Airport Parking Dfw Airport TX Card 4378	33.00 ✓
04/16	Card Purchase With Pin 04/16 Wal-Mart #5672 Lucas TX Card 4378	51.53 ✓
04/17	Card Purchase 04/16 Emirates Ghilw/16 Www.Emirates. NY Card 4378	900.00 ✓
04/17	Card Purchase 04/17 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	5.40 ✓
04/19	Card Purchase 04/18 Kabob Cowboy Richardson TX Card 4378	16.76 ✓
04/19	Card Purchase 04/18 Texaco 0303909 Richardson TX Card 4378	49.99 ✓
04/23	Card Purchase 04/22 Kfc J625020 Plano TX Card 4378	15.56 ✓
04/27	Card Purchase 04/27 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	2.15 ✓
04/30	Card Purchase With Pin 04/28 Murphy Express Allen TX Card 4378	4.89 ✓
04/30	ATM Withdrawal 04/28 1204 Angel Pkwy Allen TX Card 4378	800.00 ✓
04/30	Card Purchase With Pin 04/29 Racetrac 198 Dallas TX Card 4378	37.86 ✓
Total ATM & Debit Card Withdrawals		\$11,899.12

### ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$800.00
Total Card Purchases	\$11,099.12
Total Card Deposits & Credits	\$0.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$800.00
Total Card Purchases	\$11,099.12
Total Card Deposits & Credits	\$0.00

### ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
04/02	Paymentech Fee 6241464 CCD ID: 1020401225	\$77.40
04/03	JPMorgan Chase Auth Debit 7024830799 Web ID: 9200502233	0.50
04/18	Quickpay With Zelle Payment To Millan 7074198864	400.00
04/18	04/18 Payment To Chase Card Ending IN 3191	1,000.00
04/18	Simmons Bank - L Tel Pmts Lq97 Tel ID: 1710162300	2,406.74



March 31, 2018 through April 30, 2018  
Account Number: [REDACTED] 0290

## ELECTRONIC WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
04/23	Quickpay With Zelle Payment To Lois Martin 7087607010	1.00
04/23	Quickpay With Zelle Payment To Lois Martin 7087608941	200.00
04/24	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
<b>Total Electronic Withdrawals</b>		<b>\$4,645.88</b>

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
04/02	\$37,433.78	04/13	34,973.68	04/23	30,467.81
04/03	37,433.78	04/16	34,863.26	04/24	29,907.57
04/05	38,433.78	04/17	33,957.86	04/25	79,907.57
04/06	44,928.78	04/18	30,151.12	04/27	79,905.42
04/09	35,184.20	04/19	30,684.37	04/30	77,062.67

## SERVICE CHARGE SUMMARY

You were not charged a monthly service fee this month. Your monthly service fee can continue to be waived in five different ways during any statement period:

- Maintain an average daily balance of \$7,500.00. Your average daily balance was \$44,028.00. OR
- Maintain a relationship balance of \$25,000.00 or more during the statement period. Your relationship balance was \$42,752.00. OR
- Link a qualifying personal checking account to your Chase BusinessSelect Checking account. Your Premier Plus personal checking account is linked. OR
- Spend at least \$1,000.00 on a linked Chase Business Credit Card. You spent \$0.00. OR
- Pay at least \$50.00 in qualifying checking-related services or fees. You paid \$282.93.

See your Account Rules and Regulations or stop in to see a banker today to find out more.

### TRANSACTIONS FOR SERVICE FEE CALCULATION

	NUMBER OF TRANSACTIONS
Checks Paid / Debits	25
Deposits / Credits	6
Deposited Items	2
<b>Transaction Total</b>	<b>33</b>

### SERVICE FEE CALCULATION

	AMOUNT
Service Fee	\$15.00
Service Fee Credit	-\$15.00
<b>Net Service Fee</b>	<b>\$0.00</b>
Excessive Transaction Fees (Above 200)	\$0.00
<b>Total Service Fees</b>	<b>\$0.00</b>

### CASH PROCESSING

	AMOUNT
Cash Deposits Immediate Verification	\$1,000.00
Cash Deposits Post Verification/Night Drop	\$0.00
<b>Cash Deposits Total</b>	<b>\$1,000.00</b>
Cash Deposits Allowed	\$7,500.00
<b>Excess Cash Deposits</b>	<b>\$0.00</b>



March 31, 2018 through April 30, 2018  
Account Number: [REDACTED] 0290

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.  
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

May 01, 2018 through May 31, 2018  
Account Number: [REDACTED] 290

00029988 DRE 201 142 15218 NNNNNNNNNNN T 1 000000000 60 0000

HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-242-7338  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-888-622-4273  
International Calls: 1-713-262-1679



### We updated our Deposit Account & Wire Agreements

The following changes were made May 20, 2018:

- We published an updated version of our Deposit Account Agreement. You can get the latest agreement at a branch or by request when you call us. Here are some important changes:
  - Effective August 1, we will notify you in advance of any changes to the Deposit Account Agreement that would adversely affect you, unless the change is necessary to comply with a legal requirement. (General Account Terms, Section I, Changes to the agreement)
  - We clarified the language that explains when we may charge a Non-Chase ATM fee for balance inquiries and transfers when you use a non-Chase ATM. (Electronic Funds Transfer Service Terms, Section A, Types of EFT Services)
- We consolidated all of our Chase wire agreements, except for the Online Wire Agreement. In addition to making sure the terms and definitions of the Wire Transfer Agreement are consistent, we made the following changes:
  - When we amend the agreement, we will send you notice of the change and may refer you to a branch or your banker for the updated agreement.
  - When you send a wire, we will send you an email notification on the status of your wire if you have provided your email address.

Please call us at the number on this statement if you have any questions.

### CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$77,062.67</b>
Deposits and Additions	13	35,435.00
ATM & Debit Card Withdrawals	21	-3,276.05
Electronic Withdrawals	5	-6,001.93
Fees	1	-2.50
<b>Ending Balance</b>	<b>40</b>	<b>\$103,217.19</b>



May 01, 2018 through May 31, 2018  
Account Number: [REDACTED] 60290

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
05/04	Transfer From Chk Xxxxxx8277	\$1,000.00
05/14	Paymentech Deposit 6241464 CCD ID: 1020401225	1,495.00
05/15	Remote Online Deposit 1	10,000.00
05/16	Deposit 972720965	5,000.00
05/16	Paymentech Deposit 6241464 CCD ID: 1020401225	897.00
05/17	Paymentech Deposit 6241464 CCD ID: 1020401225	600.00
05/18	Paymentech Deposit 6241464 CCD ID: 1020401225	1,210.00
05/21	Paymentech Deposit 6241464 CCD ID: 1020401225	1,200.00
05/23	Deposit 968561194	5,000.00
05/25	Quickpay With Zelle Payment From Staffing International Inc 7174085222	1,197.00
05/25	Paymentech Deposit 6241464 CCD ID: 1020401225	560.00
05/25	Quickpay With Zelle Payment From Guy G Cannon 7177356682	276.00
05/29	Paymentech Deposit 6241464 CCD ID: 1020401225	7,000.00
Total Deposits and Additions		\$35,435.00

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
05/01	Card Purchase 04/30 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	\$0.99 ✓
05/07	Card Purchase 05/06 Brinkster Brinkster 480-388-3777 AZ Card 4378 <i>Interact</i>	30.06 ✓
05/07	Non-Chase ATM Withdraw 05/06 18599 Marsh Lane Dallas TX Card 4378	302.50 ✓
05/08	Card Purchase With Pin 05/08 T-Mobile #9094 Carrollton TX Card 4378	551.93 ✓
05/08	Card Purchase With Pin 05/08 T-Mobile #9094 Carrollton TX Card 4378	129.46 ✓
05/08	Card Purchase With Pin 05/08 T-Mobile #9094 Carrollton TX Card 4378	216.49 ✓
05/10	Card Purchase With Pin 05/10 Racetrac 93 Allen TX Card 4378	23.12 ✓
05/11	Card Purchase 05/09 Racetrac 93 00000935 Allen TX Card 4378	12.58 ✓
05/11	Card Purchase With Pin 05/11 Wm Superc Wal-Mart Sup Lucas TX Card 4378	70.83 ✓
05/14	Card Purchase 05/13 Racetrac 93 00000935 Allen TX Card 4378	27.86 ✓
05/14	Card Purchase With Pin 05/13 Wal-Mart #5672 Lucas TX Card 4378	15.56
05/15	Card Purchase 05/14 Starbucks Store 24470 Lucas TX Card 4378	3.95
05/17	Card Purchase 05/17 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	5.40
05/21	Card Purchase With Pin 05/20 Quiktrip Corp Wylie TX Card 4378	39.99
05/23	Card Purchase 05/22 Hctra Ez Tag Online 281-8753279 TX Card 4378	10.25
05/29	Card Purchase 05/27 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	2.15
05/29	Card Purchase 05/27 Sprint Store #770 Plano TX Card 4378	199.86
05/30	Card Purchase 05/30 Cheaptix*73556619701 Www.Ctix.Info WA Card 4378	44.94
05/31	Card Purchase 05/30 Spirit Airl 4870177779 Miramar FL Card 4378	787.14
05/31	Card Purchase 05/30 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	0.99
05/31	ATM Withdrawal 05/31 3047 Old Denton Rd Carrollton TX Card 4378	800.00
Total ATM & Debit Card Withdrawals		\$3,276.05

## ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$1,102.50
Total Card Purchases	\$2,173.55
Total Card Deposits & Credits	\$0.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$1,102.50
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May 01, 2018 through May 31, 2018  
Account Number: [REDACTED] 0290

Total Card Purchases \$2,173.55  
Total Card Deposits & Credits \$0.00

### ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
05/02	Paymenttech Fee 6241464 CCD ID: 1020401225	\$34.95
05/04	05/03 Payment To Chase Card Ending IN 3191	1,000.00
05/16	Simmons Bank - L Tel Pmts 5Fd7 Tel ID: 1710162300	2,406.74
05/25	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
05/29	05/26 Payment To Chase Card Ending IN 3191	2,000.00
Total Electronic Withdrawals		\$6,001.93

### FEES

DATE	DESCRIPTION	AMOUNT
05/07	Non-Chase ATM Fee-With	\$2.50
Total Fees		\$2.50

### DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
05/01	\$77,061.68	05/11	75,687.26	05/21	93,589.76
05/02	77,026.73	05/14	77,138.84	05/23	98,579.51
05/04	77,026.73	05/15	87,134.89	05/25	100,052.27
05/07	76,691.67	05/16	90,625.15	05/29	104,850.26
05/08	75,793.79	05/17	91,219.75	05/30	104,805.32
05/10	75,770.67	05/18	92,429.75	05/31	103,217.19

### SERVICE CHARGE SUMMARY

You were not charged a monthly service fee this month. Your monthly service fee can continue to be waived in five different ways during any statement period:

- Maintain an average daily balance of \$7,500.00. Your average daily balance was \$87,552.00. OR
- Maintain a relationship balance of \$25,000.00 or more during the statement period. Your relationship balance was \$86,709.00. OR
- Link a qualifying personal checking account to your Chase BusinessSelect Checking account. Your Premier Plus personal checking account is linked. OR
- Spend at least \$1,000.00 on a linked Chase Business Credit Card. You spent \$0.00. OR
- Pay at least \$50.00 in qualifying checking-related services or fees. You paid \$2.50.

See your Account Rules and Regulations or stop in to see a banker today to find out more.

#### TRANSACTIONS FOR SERVICE FEE CALCULATION

	NUMBER OF TRANSACTIONS
Checks Paid / Debits	24
Deposits / Credits	9
Deposited Items	3
Transaction Total	36

#### SERVICE FEE CALCULATION

	AMOUNT
Service Fee	\$15.00
Service Fee Credit	-\$15.00
Net Service Fee	\$0.00
Excessive Transaction Fees (Above 200)	\$0.00
Total Service Fees	\$0.00



May 01, 2018 through May 31, 2018  
Account Number: [REDACTED] 0290

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- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information

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JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

June 01, 2018 through June 29, 2018

Account Number: [REDACTED] 290

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HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-242-7338  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-888-622-4273  
International Calls: 1-713-262-1679



### CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$103,217.19</b>
Deposits and Additions	18	52,315.00
ATM & Debit Card Withdrawals	28	-2,881.70
Electronic Withdrawals	8	-109,544.71
Other Withdrawals	1	-5,429.00
Fees	2	-47.00
<b>Ending Balance</b>	<b>57</b>	<b>\$37,629.78</b>

### DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
06/06	Paymentech Deposit 6241464 CCD ID: 1020401225	\$4,500.00
06/07	Paymentech Deposit 6241464 CCD ID: 1020401225	500.00
06/11	Paymentech Deposit 6241464 CCD ID: 1020401225	400.00
06/15	Paymentech Deposit 6241464 CCD ID: 1020401225	5,540.00
06/18	Paymentech Deposit 6241464 CCD ID: 1020401225	650.00
06/19	Santosh Naik Sender Hiba Entertainm CIE ID: T941687665	1,000.00
06/19	Paymentech Deposit 6241464 CCD ID: 1020401225	236.00
06/20	Remote Online Deposit 1	10,000.00
06/20	Deposit 957112146	5,429.00
06/20	Paymentech Deposit 6241464 CCD ID: 1020401225	300.00
06/21	Remote Online Deposit 1	1,800.00
06/22	Paymentech Deposit 6241464 CCD ID: 1020401225	2,650.00
06/25	Remote Online Deposit 1	10,000.00
06/25	Deposit 967009164	5,429.00
06/27	Paymentech Deposit 6241464 CCD ID: 1020401225	1,321.00
06/28	Deposit 962788171	1,500.00
06/28	Paymentech Deposit 6241464 CCD ID: 1020401225	660.00
06/29	Paymentech Deposit 6241464 CCD ID: 1020401225	400.00
<b>Total Deposits and Additions</b>		<b>\$52,315.00</b>



June 01, 2018 through June 29, 2018  
Account Number: [REDACTED] 0290

### ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/04	Card Purchase 06/02 Expedia 7356420265741 Expedia.Com WA Card 4378	\$377.98
06/04	Card Purchase With Pin 06/03 Pilot #1028 Buffalo TX Card 4378	57.03
06/05	Card Purchase 06/01 Hilton Media Grill Bar Dallas TX Card 4378	69.48
06/07	Card Purchase 06/05 Autozone #3106 Carrollton TX Card 4378	179.97
06/07	Card Purchase 06/06 IN *Stolz Telecom Inc 405-6322262 OK Card 4378	355.31
06/07	Card Purchase 06/06 Brinkster Brinkster B 480-388-3777 AZ Card 4378	30.06
06/08	Card Purchase With Pin 06/08 7-Eleven 33621 Wylie TX Card 4378	9.99
06/11	Card Purchase 06/08 Spirit Airl 48701785926 Miramar FL Card 4378	52.00
06/11	Card Purchase 06/10 Alamo Rent-A-Car Orlando FL Card 4378	95.50
06/11	Card Purchase 06/10 Doubletree Orlando Down Orlando FL Card 4378	148.43
06/11	Card Purchase With Pin 06/10 Wawa Store 5153 Orlando FL Card 4378	4.56
06/11	Card Purchase 06/10 Dunkin #350220 Orlando FL Card 4378	8.75
06/11	Card Purchase 06/10 Magic of Disney Orlando FL Card 4378	17.02
06/12	Card Purchase 06/10 Spirit Airl 48701787258 Miramar FL Card 4378	52.00
06/13	Card Purchase 06/12 Chevron 0210336 Carrollton TX Card 4378	7.18
06/13	Card Purchase With Pin 06/13 Quiktrip Richardson TX Card 4378	27.87
06/14	Card Purchase 06/13 Starbucks Store 22380 Dallas TX Card 4378	28.74
06/14	Card Purchase 06/13 Starbucks Store 20225 Conroe TX Card 4378	6.75
06/14	Card Purchase With Pin 06/13 Buc-ee's #26 205 Ih-4 Madisonville TX Card 4378	47.32
06/15	Card Purchase 06/13 7-Eleven 33116 Dallas TX Card 4378	58.93
06/15	Card Purchase 06/14 Sq *Kabobi Fresh Medite Richardson TX Card 4378	35.96
06/18	Card Purchase 06/15 Waterfalls Lube An Allen TX Card 4378	10.00
06/18	Card Purchase With Pin 06/16 Racetrac 93 Allen TX Card 4378	37.86
06/18	Card Purchase 06/17 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	5.40
06/25	Card Purchase 06/21 Spirit Airl 4870179648 800-7727117 FL Card 4378	1,100.76
06/25	Card Purchase 06/22 Westin Atlanta Perimete Atlanta GA Card 4378	32.71
06/25	Card Purchase With Pin 06/24 Amk Field Museum Airpo Chicago IL Card 4378	21.99
06/27	Card Purchase 06/27 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4378	2.15
Total ATM & Debit Card Withdrawals		\$2,881.70

### ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$2,881.70
Total Card Deposits & Credits	\$0.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$2,881.70
Total Card Deposits & Credits	\$0.00

### ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/01	Farmers Ins EFT Pymt PPD ID: 1952575893	\$2,737.00
06/04	Quickpay With Zelle Payment To Aaam 7197335277	905.00
06/04	Paymenttech Fee 6241464 CCD ID: 1020401225	455.29
06/18	06/18 Payment To Chase Card Ending IN 3191	1,000.00
06/18	Simmons Bank - L Tel Pmts N5H7 Tel ID: 1710162300	2,647.42



June 01, 2018 through June 29, 2018  
Account Number. [REDACTED] 290

## ELECTRONIC WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
06/21	06/21 Payment To Chase Card Ending IN 3191	1,500.00
06/26	Quickpay With Zelle Payment To Guy G Cannon 7262947096	300.00
06/29	06/29 Domestic Wire Transfer A/C: Sahil Promotions, Inc. Chicago IL 60659-1803 Ref: For Da-Bangg Concert Trn: 7224700180Es	100,000.00
<b>Total Electronic Withdrawals</b>		<b>\$109,544.71</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	# of	AMOUNT
06/22	Deposited Item Returned Altered/Fictiti099002857 Items00001Ck#:0000009742 Date062018Ck Amt0000542900 Fee001200	Dep Svc	\$5,429.00
<b>Total Other Withdrawals</b>			<b>\$5,429.00</b>

## FEES

DATE	DESCRIPTION	# of	AMOUNT
06/22	Deposit Item Returned Fee: 01 Altered/Fictiti099002857 Items00001Ck#:0000009742 Date062018Ck Amt0000001200 Fee001200	Dep Svc	\$12.00
06/29	Domestic Wire Fee		35.00
<b>Total Fees</b>			<b>\$47.00</b>

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
06/01	\$100,480.19	06/12	103,061.82	06/21	122,603.39
06/04	98,684.89	06/13	103,026.77	06/22	119,812.39
06/05	98,615.41	06/14	102,943.96	06/25	134,085.93
06/06	103,115.41	06/15	108,389.07	06/26	133,785.93
06/07	103,050.07	06/18	105,338.39	06/27	135,104.78
06/08	103,040.08	06/19	106,574.39	06/28	137,264.78
06/11	103,113.82	06/20	122,303.39	06/29	37,629.78

## SERVICE CHARGE SUMMARY

You were not charged a monthly service fee this month. Your monthly service fee can continue to be waived in five different ways during any statement period:

- Maintain an average daily balance of \$7,500.00. Your average daily balance was \$108,464.00. OR
- Maintain a relationship balance of \$25,000.00 or more during the statement period. Your relationship balance was \$110,726.00. OR
- Link a qualifying personal checking account to your Chase BusinessSelect Checking account. Your Premier Plus personal checking account is linked. OR
- Spend at least \$1,000.00 on a linked Chase Business Credit Card. You spent \$0.00. OR
- Pay at least \$50.00 in qualifying checking-related services or fees. You paid \$47.00.

See your Account Rules and Regulations or stop in to see a banker today to find out more.



June 01, 2018 through June 29, 2018  
Account Number: [REDACTED] 290

**SERVICE CHARGE SUMMARY** (continued)

TRANSACTIONS FOR SERVICE FEE CALCULATION		NUMBER OF TRANSACTIONS
Checks Paid / Debits		32
Deposits / Credits		15
Deposited Items		5
<b>Transaction Total</b>		<b>52</b>
SERVICE FEE CALCULATION		AMOUNT
Service Fee		\$15.00
Service Fee Credit		-\$15.00
<b>Net Service Fee</b>		<b>\$0.00</b>
Excessive Transaction Fees (Above 200)		\$0.00
<b>Total Service Fees</b>		<b>\$0.00</b>
CASH PROCESSING		AMOUNT
Cash Deposits Immediate Verification		\$1,500.00
Cash Deposits Post Verification/Night Drop		\$0.00
<b>Cash Deposits Total</b>		<b>\$1,500.00</b>
Cash Deposits Allowed		\$7,500.00
<b>Excess Cash Deposits</b>		<b>\$0.00</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.  
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

June 30, 2018 through July 31, 2018  
Account Number: [REDACTED] 0290

00028396 DRE 201 142 21318 NNNNNNNNNN T 1 000000000 60 0000  
HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

# CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-242-7338  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-888-622-4273  
International Calls: 1-713-262-1679



## CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$37,629.78</b>
Deposits and Additions	12	68,264.00
Checks Paid	3	-40,745.00
ATM & Debit Card Withdrawals	27	-2,531.04
Electronic Withdrawals	9	-34,126.46
Other Withdrawals	1	-10,000.00
Fees	5	-145.75
<b>Ending Balance</b>	<b>57</b>	<b>\$18,345.53</b>

The monthly service fee for this account was waived because you used at least \$50.00 in other checking services during the statement period.

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
07/02	Deposit 1796433753	\$7,806.00
07/02	Remote Online Deposit 1	2,500.00
07/02	Remote Online Deposit 1	570.00
07/05	Deposit 969218874	20,000.00
07/09	Card Purchase Return 07/06 Cheaptix*73640459876 Www.Ctix.Info WA Card 4378	58.04
07/09	Card Purchase Return 07/06 Cheaptix*73640459876 Www.Ctix.Info WA Card 4378	29.96
07/16	Deposit 988478400	5,000.00
07/17	Deposit 971481737	5,000.00
07/18	Deposit 980029591	1,500.00
07/19	Quickpay With Zelle Payment From Guy G Cannon 7326022985	300.00
07/25	Deposit 1725781662	9,000.00
07/31	Deposit 1799465557	16,500.00
<b>Total Deposits and Additions</b>		<b>\$68,264.00</b>



June 30, 2018 through July 31, 2018  
Account Number: [REDACTED] 0290

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1045 ^		07/02	\$2,100.00
1048 * ^		07/02	35,000.00
1049 ^		07/19	3,645.00
<b>Total Checks Paid</b>			<b>\$40,745.00</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
07/02	Card Purchase 06/30 Apl*Itunes.Com/Bill 800-275-2273 CA Card 4378	\$0.99
07/02	Recurring Card Purchase 07/01 Sprint *Wireless 800-639-6111 KS Card 4378	136.60
07/05	Card Purchase With Pin 07/03 Racetrac 93 Allen TX Card 4378	45.11
07/06	Card Purchase 07/06 Cheaptix*73640459876 Www.Ctix.Info WA Card 4378	88.00
07/06	Card Purchase 07/06 Cheaptix*73640459876 Www.Ctix.Info WA Card 4378	29.96
07/09	Card Purchase 07/05 United 016712057 800-932-2732 TX Card 4378	602.40
07/09	Card Purchase 07/05 United 016712057 800-932-2732 TX Card 4378	602.40
07/09	Card Purchase 07/06 Brinkster Brinkster B 480-388-3777 AZ Card 4378	30.06
07/09	Card Purchase 07/06 American Air00121983119 Fort Worth TX Card 4378	500.40
07/09	Card Purchase 07/06 American Air00106277318 Fort Worth TX Card 4378	35.00
07/09	Card Purchase 07/06 Dallas FT. Worth Airpo Dfw Airport TX Card 4378	9.20
07/09	Card Purchase With Pin 07/09 Racetrac 93 Allen TX Card 4378	15.59
07/17	Card Purchase 07/17 Apl*Itunes.Com/Bill 800-275-2273 CA Card 4378	5.40
07/18	Card Purchase 07/17 Alamo Rent Acar Tolls 877-8601284 NY Card 4378	6.20
07/20	Card Purchase With Pin 07/20 Wm Superc Wal-Mart Sup Lucas TX Card 4378	79.33
07/20	Card Purchase With Pin 07/20 Wm Superc Wal-Mart Sup Lucas TX Card 4378	1.45
07/23	Card Purchase 07/20 Sq *Kabobi Fresh Medite Richardson TX Card 4378	42.45
07/23	Card Purchase With Pin 07/21 Racetrac 93 Allen TX Card 4378	17.86 ✓
07/23	Card Purchase With Pin 07/21 Quiktrip Plano TX Card 4378	61.94 ✓
07/24	Card Purchase With Pin 07/24 Racetrac 93 Allen TX Card 4378	27.87
07/25	Recurring Card Purchase 07/25 Adobe *Acropro Subs 800-833-6687 CA Card 4378	16.23
07/26	Card Purchase With Pin 07/26 Racetrac 93 Allen TX Card 4378	13.14
07/26	Card Purchase With Pin 07/26 Racetrac 93 Allen TX Card 4378	15.46
07/26	Card Purchase With Pin 07/26 Racetrac 93 Allen TX Card 4378	14.46
07/27	Card Purchase 07/27 Apl*Itunes.Com/Bill 800-275-2273 CA Card 4378	2.15
07/31	Card Purchase 07/30 Apl*Itunes.Com/Bill 800-275-2273 CA Card 4378	0.99
07/31	Recurring Card Purchase 07/31 Sprint *Wireless 800-639-6111 KS Card 4378	130.40
Total ATM & Debit Card Withdrawals		\$2,531.04

## ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$2,531.04
Total Card Deposits & Credits	\$88.00



June 30, 2018 through July 31, 2018  
Account Number: [REDACTED] 60290

ATM & Debit Card Totals

Total ATM Withdrawals & Debits \$0.00  
Total Card Purchases \$2,531.04  
Total Card Deposits & Credits \$88.00

**ELECTRONIC WITHDRAWALS**

DATE	DESCRIPTION	AMOUNT
07/02	Paymentech Chargeback 6241464 CCD ID: 1020401225	\$4,000.00
07/02	Paymentech Deposit 6241464 CCD ID: 1020401225	4,000.00
07/02	Paymentech Fee 6241464 CCD ID: 1020401225	568.80
07/06	07/06 Domestic Wire Transfer Via: Tib Dallas/111010170 A/C: Grand Ridge National Bank Ref: Fct: Vibrant Media Group LLC; Account # 0020008413 Imad: 0706B1Qgc07C001666 Trn: 6384800186Es	16,200.00
07/09	Paymentech Chargeback 6241464 CCD ID: 1020401225	2,500.00
07/11	Paymentech Chargeback 6241464 CCD ID: 1020401225	2,650.00
07/17	Paymentech Chargeback 6241464 CCD ID: 1020401225	1,000.00
07/18	Simmons Bank - L Tel Pmts V8L7 Tel ID: 1710162300	2,647.42
07/25	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
<b>Total Electronic Withdrawals</b>		<b>\$34,126.46</b>

**OTHER WITHDRAWALS**

DATE	DESCRIPTION	AMOUNT
07/25	07/25 Withdrawal	\$10,000.00
<b>Total Other Withdrawals</b>		<b>\$10,000.00</b>

**FEES**

DATE	DESCRIPTION	AMOUNT
07/06	Domestic Wire Fee	\$35.00
07/11	Insufficient Funds Fee For A \$2,650.00 Item - Details: Paymentech Chargeback 6241464 CCD ID: 1020401225	34.00
07/24	Official Checks Charge	8.00
07/25	Official Checks Charge	8.00
07/31	Cash Deposit Immediate	60.75
<b>Total Fees</b>		<b>\$145.75</b>

**DAILY ENDING BALANCE**

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
07/02	\$2,699.39	07/17	8,404.87	07/24	3,667.35
07/05	22,654.28	07/18	7,251.25	07/25	2,082.88
07/06	6,301.32	07/19	3,906.25	07/26	2,039.82
07/09	2,094.27	07/20	3,825.47	07/27	2,037.67
07/11	-589.73	07/23	3,703.22	07/31	18,345.53
07/16	4,410.27				



June 30, 2018 through July 31, 2018  
Account Number: [REDACTED] 0290

## SERVICE CHARGE SUMMARY

TRANSACTIONS FOR SERVICE FEE CALCULATION	NUMBER OF TRANSACTIONS
Checks Paid / Debits	40
Deposits / Credits	7
Deposited Items	8
<b>Transaction Total</b>	<b>55</b>
<b>SERVICE FEE CALCULATION</b>	<b>AMOUNT</b>
Service Fee	\$0.00
Service Fee Credit	\$0.00
<b>Net Service Fee</b>	<b>\$0.00</b>
Excessive Transaction Fees (Above 200)	\$0.00
<b>Total Service Fees</b>	<b>\$0.00</b>
<b>CASH PROCESSING</b>	<b>AMOUNT</b>
Cash Deposits Immediate Verification	\$31,800.00
Cash Deposits Post Verification/Night Drop	\$0.00
<b>Cash Deposits Total</b>	<b>\$31,800.00</b>
Cash Deposits Allowed	\$7,500.00
<b>Excess Cash Deposits</b>	<b>\$24,300.00</b>
Excess Immediate (\$24,300 At \$2.50/\$1,000)	\$60.75
<b>Total Cash Deposit And Change Order Fees</b>	<b>\$60.75</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

August 01, 2018 through August 31, 2018  
Account Number: [REDACTED] 60290

00028064 DRE 201 142 24418 NNNNNNNNNN T 1 000000000 60 0000  
HIBA ENTERTAINMENT INC  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-242-7338  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-888-622-4273  
International Calls: 1-713-262-1679



#### CHECKING SUMMARY

Chase BusinessSelect Checking

	INSTANCES	AMOUNT
Beginning Balance		\$18,345.53
ATM & Debit Card Withdrawals	1	-30.06
Electronic Withdrawals	1	-16,500.00
Other Withdrawals	2	-1,780.47
Fees	1	-35.00
Ending Balance	5	\$0.00

#### ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
08/07	Card Purchase 08/06 Brinkster Brinkster B 480-388-3777 AZ Card 4378	\$30.06
Total ATM & Debit Card Withdrawals		\$30.06

#### ATM & DEBIT CARD SUMMARY

Muhammad Siddiqi Card 4378

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$30.06
Total Card Deposits & Credits	\$0.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$30.06
Total Card Deposits & Credits	\$0.00

#### ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
08/01	08/01 Domestic Wire Transfer Via: Tib Dallas/111010170 A/C: Grand Ridge National Bank Ref: For Further Credit To: Vibrant Media Group LLC 1069 W Golf Rd Hoffman Es Tales, IL 60169 Account # 0020008413 Imad: 0801B1Qgc08C033917 Trn: 6686000213Es	\$16,500.00 ✓

Total Electronic Withdrawals	\$16,500.00
------------------------------	-------------



August 01, 2018 through August 31, 2018  
Account Number: [REDACTED] 60290

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
08/08	Payment To Chase Card Ending IN 3191	\$500.00
08/13	Debit DDA - Check Charge	1,280.47
Total Other Withdrawals		\$1,780.47

## FEES

DATE	DESCRIPTION	AMOUNT
08/01	Domestic Wire Fee	\$35.00
Total Fees		\$35.00

## DAILY ENDING BALANCE

DATE	AMOUNT
08/01	\$1,810.53
08/07	1,780.47
08/08	1,280.47
08/13	0.00

## SERVICE CHARGE SUMMARY

TRANSACTIONS FOR SERVICE FEE CALCULATION	NUMBER OF TRANSACTIONS
Checks Paid / Debits	2
Deposits / Credits	0
Deposited Items	0
Transaction Total	2

SERVICE FEE CALCULATION	AMOUNT
Service Fee	\$0.00
Service Fee Credit	\$0.00
Net Service Fee	\$0.00
Excessive Transaction Fees (Above 200)	\$0.00
Total Service Fees	\$0.00

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.  
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC

# 3.

# Amended Schedules

Fill in this information to identify your case and this filing:

Debtor 1	<b>Muhammad Nasir Siddiqi</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>			
Case number	<b>19-42834</b>		

☐ Check if this is an amended filing

Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

**6701 Haven Hurst**

Street address, if available, or other description

**Allen TX 75002-0000**  
City State ZIP Code

**Collin**

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<b>\$735,000.00</b>	<b>\$735,000.00</b>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$735,000.00**

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.



Debtor 1 **Muhammad Nasir Siddiqi**Case number (if known) **19-42834****3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**☐ No☒ Yes

3.1 Make: **Ford**  
 Model: **Tahoe**  
 Year: **2016**  
 Approximate mileage: **20000**  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
 (see instructions)

Do not deduct secured claims or exemptions. Put  
 the amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

Current value of the  
entire property?Current value of the  
portion you own?**\$20,000.00****\$20,000.00**

3.2 Make: **Ford**  
 Model: **Tahoe**  
 Year: **2016**  
 Approximate mileage: **20000**  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
 (see instructions)

Do not deduct secured claims or exemptions. Put  
 the amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

Current value of the  
entire property?Current value of the  
portion you own?**\$20,000.00****\$20,000.00**

3.3 Make: **Ford**  
 Model: **Super Duty**  
 Year: **2015**  
 Approximate mileage: **50000**  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
 (see instructions)

Do not deduct secured claims or exemptions. Put  
 the amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

Current value of the  
entire property?Current value of the  
portion you own?**\$30,000.00****\$30,000.00**

3.4 Make: **Lincoln**  
 Model: **Navigator**  
 Year: **2019**  
 Approximate mileage: **10000**  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
 (see instructions)

Do not deduct secured claims or exemptions. Put  
 the amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

Current value of the  
entire property?Current value of the  
portion you own?**\$90,000.00****\$90,000.00****4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for  
 pages you have attached for Part 2. Write that number here.....=>

**\$160,000.00****Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the  
 portion you own?  
 Do not deduct secured  
 claims or exemptions.

Debtor 1 **Muhammad Nasir Siddiqi**Case number (if known) **19-42834****6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.....

sofa (300), 3 televisiosn (1,000), 14 chairs (700), 2 love seats (1,000), dining room table (1000) , 3 beds (1500) , 3 drerssers (1500), 2 rugs, (500) kitchen table (500), other household items (1000)

**\$10,000.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☒ No☐ Yes. Describe.....**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☒ Yes. Describe.....

1 pistol

**\$400.00****11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....

clothes

**\$1,000.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....

watch (200) , wifes jewelry (bangles (2500), rings (2500), necklaces (1500), earrings (1000) other jewelry (1000)

**\$10,000.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☒ No☐ Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....

Debtor 1 Muhammad Nasir SiddiqiCase number (if known) **19-42834**

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

**\$21,400.00****Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No☐ Yes.....**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes.....

Institution name:

17.1.

Chase bank - frozenUnknown

17.2.

Texans Credit Union\$300.00

17.3.

Chase Accounts -wives\$300.00**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Hiba Entertainment, Inc. - out of business100%\$0.00**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes. ....

Institution name or individual:

Debtor 1 **Muhammad Nasir Siddiqi**Case number (if known) **19-42834****23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☐ No☐ Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☐ No☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☐ No☐ Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☐ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☐ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☐ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☐ No☐ Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☐ No☐ Yes. Give specific information..**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☐ No☐ Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☐ No☐ Yes. Describe each claim.....

Debtor 1 **Muhammad Nasir Siddiqi**Case number (if known) **19-42834****34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$600.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*

- ☒ No  
☐ Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....****\$0.00****Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 .....		<b>\$735,000.00</b>
56. Part 2: Total vehicles, line 5	<b>\$160,000.00</b>	
57. Part 3: Total personal and household items, line 15	<b>\$21,400.00</b>	
58. Part 4: Total financial assets, line 36	<b>\$600.00</b>	
59. Part 5: Total business-related property, line 45	<b>\$0.00</b>	
60. Part 6: Total farm- and fishing-related property, line 52	<b>\$0.00</b>	
61. Part 7: Total other property not listed, line 54	<b>+</b> <b>\$0.00</b>	
62. Total personal property. Add lines 56 through 61...	<b>\$182,000.00</b>	Copy personal property total <b>\$182,000.00</b>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<b>\$917,000.00</b>

# 4. Car Titles



LINCOLN AUTOMOTIVE FIN'L SVCS  
PO BOX 105704  
ATLANTA, GA 30348

00113003

↓ DETACH HERE ↓

# TEXAS CERTIFICATE OF TITLE



TEXAS DEPARTMENT OF MOTOR VEHICLES

VEHICLE IDENTIFICATION NUMBER  
**5LMJJ3LT9KEL17881**

YEAR MODEL  
**2019**

MAKE OF VEHICLE  
**LINC**

**149138818**  
BODY STYLE  
**LL**

TITLE/DOCUMENT NUMBER

DATE TITLE ISSUED

**04337043696151249 08/29/2019**

MODEL

MFG. CAPACITY  
IN TONS

WEIGHT

LICENSE NUMBER

**6100**

PREVIOUS OWNER

**DAVID MCDAVID LINC MERC PLANO TX**  
OWNER

ODOMETER READING  
**15**

REMARK(S)

**MUHAMMAD NASIR SIDDIQI**  
**14411 TANGLEWOOD DRIVE**  
**FARMERS BRANCH, TX 75234**

**ACTUAL MILEAGE**

X. \_\_\_\_\_  
SIGNATURE OF OWNER OR AGENT MUST BE IN INK

UNLESS OTHERWISE AUTHORIZED BY LAW, IT IS A VIOLATION OF STATE LAW TO SIGN  
THE NAME OF ANOTHER PERSON ON A CERTIFICATE OF TITLE OR OTHERWISE GIVE FALSE  
INFORMATION ON A CERTIFICATE OF TITLE.

DATE OF LIEN

1ST LIENHOLDER

**07/18/2019 LINCOLN AUTOMOTIVE FIN'L SVCS**  
**PO BOX 105704**  
**ATLANTA, GA 30348**

1ST LIEN RELEASED

DATE

BY

AUTHORIZED AGENT

DATE OF LIEN

2ND LIENHOLDER

2ND LIEN RELEASED

DATE

BY

AUTHORIZED AGENT

DATE OF LIEN

3RD LIENHOLDER

3RD LIEN RELEASED

DATE

BY

AUTHORIZED AGENT

IT IS HEREBY CERTIFIED THAT THE PERSON HEREIN NAMED IS THE OWNER  
OF THE VEHICLE DESCRIBED ABOVE WHICH IS SUBJECT TO THE ABOVE LIENS.

RIGHTS OF SURVIVORSHIP AGREEMENT  
WE, THE MARRIED PERSONS WHOSE SIGNATURES APPEAR HEREIN, HEREBY  
AGREE THAT THE OWNERSHIP OF THE VEHICLE DESCRIBED ON THIS  
CERTIFICATE OF TITLE SHALL FROM THIS DAY FORWARD BE HELD JOINTLY,  
AND IN THE EVENT OF DEATH OF ANY OF THE PERSONS NAMED IN THE  
AGREEMENT, THE OWNERSHIP OF THE VEHICLE SHALL VEST IN THE SURVIVOR(S).

SIGNATURE

DATE

SIGNATURE

DATE

SIGNATURE

DATE

Dealer Number \_\_\_\_\_ Contract Number \_\_\_\_\_

DEAL 234670

5. The Buyer is referred to as "you" or "your" The Seller is referred to as "

VEHICLE IDENTIFICATION

Trade-in Make \_\_\_\_\_ Model \_\_\_\_\_  
Year \_\_\_\_\_ VIN \_\_\_\_\_ License No. \_\_\_\_\_

**Late Charge:** If we do not receive your entire payment within 15 days after it is due (10 days if you are buying a heavy commercial vehicle), you will pay a late charge of 5% of the scheduled payment.

**Prepayment:** If you pay off that you owe early, you will not have to pay a penalty.

**Security Interest:** We will have a security interest in the vehicle being purchased.

**Additional Information:** See this document for more information about nonpayment, default, security interests, and any required repayment in full before the scheduled date.

A DOCUMENTARY FEE IS NOT AN OFFICIAL FEE. A DOCUMENTARY FEE IS NOT REQUIRED BY LAW, BUT MAY BE CHARGED TO BUYERS FOR HANDLING DOCUMENTS RELATING TO THE SALE. A DOCUMENTARY FEE MAY NOT EXCEED A REASONABLE AMOUNT AGREED TO BY THE PARTIES. THIS NOTICE IS REQUIRED BY LAW.

UN CARGO DOCUMENTAL NO ES UN CARGO OFICIAL LA LEY NO EXIGE QUE SE IMPONGA UN CARGO DOCUMENTAL PERO ESTE PODRIA COBRARSE A LOS COMPRADORES POR EL MANEJO DE LA DOCUMENTACION EL RELACION CON LA VENTA UN CARGO DOCUMENTAL NO PUEDE EXCEDER UNA CANTIDAD RAZONABLE ACORDADA POR LAS PARTES ESTA NOTIFICACION SE EXIGE POR LEY

CONSUMER CREDIT COMMISSIONER NO

To contact SUNTRUST BANK about this account, call 972-270-5441. This contract is subject in whole or in part to Texas law which is enforced by the Consumer Credit Commissioner, 2601 N. Lamar Blvd., Austin, Texas 78705-4207; (800) 538-1579; [www.occc.state.tx.us](http://www.occc.state.tx.us), and can be contacted relative to any inquiries or complaints.

*The Annual Percentage Rate may be negotiable with the Seller. The Seller may assign this contract and retain its right to receive a part of the Finance Charge.*

Any change to this contract must be in writing. Both you and we must sign it. No oral changes to this contract are enforceable.

Buyer X \_\_\_\_\_ Co-Buyer X \_\_\_\_\_  
See back for other important agreements.

**CONSUMER WARNING:** Notice to the buyer--Do not sign this contract before you read it or if it contains any blank spaces. You are entitled to a copy of the contract you sign. Under the law, you have the right to pay off in advance all that you owe and under certain conditions may save a portion of the finance charge. You will keep this contract to protect your legal rights.

BUYER'S ACKNOWLEDGEMENT OF CONTRACT RECEIPT: YOU AGREE TO THE TERMS OF THIS CONTRACT AND ACKNOWLEDGE RECEIPT OF A COMPLETED COPY OF IT. YOU CONFIRM THAT BEFORE YOU SIGNED THIS CONTRACT, WE GAVE IT TO YOU, AND YOU WERE FREE TO TAKE IT AND REVIEW IT. YOU ACKNOWLEDGE THAT YOU HAVE READ BOTH SIDES OF THIS CONTRACT, INCLUDING THE ARBITRATION CLAUSE ON THE REVERSE SIDE, BEFORE SIGNING BELOW.

Buyer Signs ☒ W. Hall Date 01/30/2016 Co-Buyer Signs ☒ N/A Date \_\_\_\_\_

CO-buyers and Other Owners — A co-buyer is a person who is responsible for paying the entire debt! An other owner is a person whose name is on the title to the vehicle but does not have to pay the debt. The other owner agrees to the security interest in the vehicle given to us in this contract.

Other owner signs here: X Date: N/A Address: N/A

Seller signs: TOWN EAST FORD Date: 6/13/2015 By X Title: \_\_\_\_\_

THIS CONTRACT IS NOT VALID UNTIL YOU AND WE SIGN IT

Seller assigns its interest in this contract to Trust (Assignee) under the terms of Seller's agreement(s) with Assignee

☐ Assigned with recourse      ☒ Assigned with limited recourse      ☒ Assigned with limited recourse

Seller TOWN EAST FORD By [Signature] Title [Signature]

**LAW**

FORM NO. 553-TX-ARB 2/12 IS RETURNED UNLESS  
0912 The Remittance and Remedy Company, INC. All rights reserved. 1-800-567-0912 or 1-800-567-0912  
THE FRONTIERS ARE NOT GUARANTEE EXPENSE OR IMPLIED AS TO CONTENT OR

GUYTON NEWCOMBER

WITNESS FOR PURPOSE OF THIS FORM, CONSULT YOUR OWN LEGAL COUNSEL.



OTHER TERMS AND CONDITIONS

1. FINANCE CHARGE AND PAYMENTS

a. **HOW WE FIGURE THE FINANCE CHARGE.** We figure the Finance Charge using the true daily earnings method as defined by the Texas Finance Code. Under the true daily earnings method, the Finance Charge will be figured by applying the daily rate to the unpaid portion of the Amount Financed for the number of days the unpaid portion of the Amount Financed is outstanding. The daily rate is 1/365 of the Annual Percentage Rate. The unpaid portion of the Amount Financed does not include late charges or return check charges.

b. **HOW WE WILL APPLY YOUR PAYMENTS.** We will apply your payments in the following order:

1. earned but unpaid finance charge, and
2. to anything else you owe under this agreement.

c. **HOW LATE OR EARLY PAYMENTS CHANGE WHAT YOU MUST PAY.** We based the Finance Charge, Total of Payments, and Total Sale Price as if all payments were made as scheduled. If you do not timely make all your payments in at least the correct amount, you will have to pay more Finance Charge. If that happens, your last payment will be more than your final scheduled payment, or at our option, you will have to pay more payments of the same amount as your scheduled payment with a smaller last payment. If you make scheduled payments early, your Finance Charge will be reduced (less). If you make your scheduled payments late, your Finance Charge will increase. We will send you a notice telling you about these changes before the final scheduled payment is due.

d. **INTEREST AFTER MATURITY.** If you do not pay all you owe when the final payment becomes due, or if you do not pay all you owe if we demand payment in full under this contract, you will pay an interest charge on the amount that is still unpaid. That interest charge will be the higher rate of 18% per year or the maximum rate allowed by law, if that rate is higher. The interest charge for this amount will begin the day after the final payment becomes due.

e. **TRANSFER OF RIGHTS.** We may transfer this contract to another person. That person will then have all your promises, and remedies.

f. **SPECIAL PROVISIONS FOR BALLOON PAYMENT CONTRACTS.** A balloon payment is a scheduled payment more than twice the amount of the average of your scheduled payments, other than the downpayment, that are due before the balloon payment. You can pay for you owe when the balloon payment is due and keep your vehicle. If you buy the vehicle primarily for personal, family or household use, you can enter into a new written agreement to refinance the balloon payment when due without a refinancing fee. If you refinance the balloon payment, your periodic payments will not be larger or more often than the payments in this contract. The annual percentage rate in the new agreement will not be more than the Annual Percentage Rate in this contract. This provision does not apply if your Payment Schedule has been adjusted to your seasonal or irregular income.

2. YOUR OTHER PROMISES TO US

a. **USE AND TRANSFER OF THE VEHICLE.** You will not sell or transfer the vehicle without our written permission. If you do sell or transfer the vehicle, this will not release you from your obligations under this contract, and we may charge you a transfer of equity fee of \$25.00 (\$50 for a heavy commercial vehicle). You will promptly tell us in writing if you change your address or if the address where you keep the vehicle. We agree you may remove the vehicle from the U.S. for 72 hours or less, if the vehicle will continue to be covered by the insurance this contract requires. Otherwise, you agree not to remove the vehicle from the U.S. without our written permission.

b. **CARE OF THE VEHICLE.** You agree to keep the vehicle free from all liens, and claims except those that secure this contract. You will timely pay all taxes, fees, or charges pertaining to the vehicle. You will keep the vehicle in good repair. You will not allow the vehicle to be seized or placed in jeopardy or use it illegally. You must pay all you owe even if the vehicle is lost, damaged or destroyed. If a third party takes a lien or claim against or possession of the vehicle, we may pay the third party any cost required to free the vehicle from all liens or claims. We may immediately demand that you pay us the amount paid to the third party for the vehicle. If you do not pay that amount, we may repossess the vehicle and add that amount to the amount you owe. If we do not repossess the vehicle, we may still demand that you pay us, but we cannot compute a finance charge on this amount.

c. **SECURITY INTEREST.** To secure all that you owe on this contract and all your promises in it, you give us a security interest in:

1. The vehicle including all accessories and parts now or later attached and any other goods financed in this contract;
2. All insurance proceeds and other proceeds received for the vehicle;
3. Any insurance policy, service contract or other contract financed by us and any proceeds of those contracts; and
4. Any refunds of charges included in this contract for insurance, or service contracts.

This security interest also secures any extension or modification of this contract. The certificate of title must show our security interest in the vehicle.

d. **AGREEMENT TO KEEP VEHICLE INSURED.** You agree to have physical damage insurance covering loss or damage to the vehicle for the term of this contract. The insurance must cover our interest in the vehicle.

e. **OUR RIGHT TO PURCHASE REQUIRED INSURANCE IF YOU FAIL TO KEEP THE VEHICLE INSURED.** If you fail to give us proof that you have insurance, we may buy physical damage insurance. We may buy insurance that covers your interest and our interest in the vehicle, or we may buy insurance that covers our interest only. You will pay the premium for the insurance and a finance charge at the contract rate. If we obtain collateral protection insurance, we will mail notice to your last known address shown on file.

f. **PHYSICAL DAMAGE INSURANCE PROCEEDS.** You must use physical damage insurance proceeds to repair the vehicle, unless we agree otherwise in writing. However, if the vehicle is a total loss, you must use the insurance proceeds to pay what you owe us. You agree that we can use any proceeds from insurance to repair the vehicle, or we may repair what you owe under this contract. If we apply insurance proceeds to the amount you owe, they will be applied to your payments in the reverse order of when they are due. If your insurance on the vehicle or credit insurance doesn't pay all you owe, you must pay what is still owed. Once all amounts owed under this contract are paid, any remaining proceeds will be paid to you.

3. IF YOU PAY LATE OR BREAK YOUR OTHER PROMISES

a. **LATE CHARGE.** You will pay us a late charge as agreed to in this contract when it occurs.

b. **DEFAULT.** You will be in default if:

1. You do not pay any amount when it is due;
2. You give false, incomplete, or misleading information on a credit application;
3. You file bankruptcy, bankruptcy is filed against you, or the vehicle becomes involved in a bankruptcy;
4. You allow a judgment to be entered against you or the collateral; or
5. You break any of your promises in this agreement.

If you default, we can exercise our rights under this contract and our other rights under the law.

c. **OUR RIGHT TO DEMAND PAYMENT IN FULL.** If you default, or we believe in good faith that you are not going to keep any of your promises, we can demand that you immediately pay all that you owe. We don't have to give you notice that we are demanding or intend to demand immediate payment of all that you owe.

d. **REPOSSESSION.** If you default, we may repossess the vehicle from you if we do so peacefully. If your vehicle has an electronic tracking device, you agree that we may use the device to find the vehicle. If any personal items are in the vehicle, we can store them for you and give you written notice at your last known address shown on our records within 15 days of discovering that we have your personal items. If you do not ask for these items back within 31 days from the day we mail or deliver the notice to you, we may dispose of them as applicable law allows. Any accessory, equipment, or replacement part stays with the vehicle.

e. **YOUR RIGHT TO REDEEM.** If we take your vehicle, we will tell you how much you have to pay to get it back. If you do not pay us to get the vehicle back, we can sell it or take other action allowed by law. Your right to redeem ends when the vehicle is sold or we have entered into a contract for sale or accepted the collateral as full or partial satisfaction of a contract.

f. **DISPOSITION OF THE VEHICLE.** If you don't pay us to get the vehicle back, we can sell it or take other action allowed by law. We will send you notice at least 10 days before we sell it. We can use the money we get from selling it to pay allowed expenses and to reduce the amount you owe. Allowed expenses are expenses we pay as a direct result of taking the vehicle, holding it, preparing it for sale, and selling it. If any money is left, we will pay it to you unless we must pay it to someone else. If the money from the sale is not enough to pay all you owe, you must pay the rest of what you owe our interest. If we sell or sell the vehicle, you will give us the certificate of title and any other document required by state law to record transfer of title.

g. **COLLECTION COSTS.** If we hire an attorney who is not our employee to enforce this contract, you will pay reasonable attorney's fees and court costs as the applicable law allows. You will also pay our reasonable out-of-pocket expenses incurred in connection with seeking, holding, and selling the vehicle as the applicable law allows.

h. **CANCELLATION OF OPTIONAL INSURANCE AND SERVICE CONTRACTS.** This contract may contain charges for insurance or service contracts or for services included in the cash price. If you default, you agree that we can claim benefits under these contracts to the extent allowable, and terminate them to obtain refunds of unearned charges to reduce what you owe or repair the vehicle. If the vehicle is a total loss because it is damaged or stolen, we may claim benefits under these contracts and cancel them to obtain refunds of unearned charges to reduce what you owe.

4. INTEGRATION AND SEVERABILITY CLAUSE

This contract contains the entire agreement between you and us relating to the sale and financing of the vehicle. If any part of this contract is not valid, all other parts stay valid.

5. LEGAL LIMITATIONS ON OUR RIGHTS

If we don't enforce our rights every time, we can still enforce them later. We will exercise all of our rights in a lawful way. You don't have to pay finance charge or other amounts that are more than the law allows. This provision prevails over all other parts of this contract and over all our other acts.

6. SELLER'S DISCLAIMER OF WARRANTIES

Unless the seller makes a written warranty, or enters into a service contract within 90 days from the date of this contract, the seller makes no warranties, express or implied, on the vehicle, and there will be no implied warranties of merchantability or of fitness for a particular purpose. This provision does not affect any warranties covering the vehicle that the vehicle manufacturer may provide.

7. **Used Car Buyers Guide.** The information you see on the window form for this vehicle is part of this contract. Information on the window form overrides any contrary provisions in the contract of sale.

**Spanish Translation.** Guía para compradores de vehículos usados. La información que ve en el formulario de la ventanilla para este vehículo forma parte del presente contrato. La información del formulario de la ventanilla deya sin efecto toda disposición en contrario contenida en el contrato de venta.

8. APPLICABLE LAW

Federal and Texas law apply to this contract.

NOTICE: ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES WHICH THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS OR SERVICES OBTAINED PURSUANT HERETO OR WITH THE PROCEEDS THEREOF. RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER.

This PROVISION applies to this contract only if the vehicle financed in the contract was purchased for personal, family, or household use.

ARBITRATION CLAUSE

PLEASE REVIEW - IMPORTANT - AFFECTS YOUR LEGAL RIGHTS

1. EITHER YOU OR WE MAY CHOOSE TO HAVE ANY DISPUTE BETWEEN US DECIDED BY ARBITRATION AND NOT IN COURT OR BY JURY TRIAL.

2. IF A DISPUTE IS ARBITRATED, YOU WILL GIVE UP YOUR RIGHT TO PARTICIPATE AS A CLASS REPRESENTATIVE OR CLASS MEMBER ON ANY CLASS CLAIM YOU MAY HAVE AGAINST US INCLUDING ANY RIGHT TO CLASS ARBITRATION OR ANY CONSOLIDATION OF INDIVIDUAL ARBITRATIONS.

3. **DISCOVERY AND RIGHTS TO APPEAL.** IN ARBITRATION ARE GENERALLY MORE LIMITED THAN IN A LAWSUIT, AND OTHER RIGHTS THAT YOU AND WE WOULD HAVE IN COURT MAY NOT BE AVAILABLE IN ARBITRATION.

Any claim or dispute, whether in contract, tort, statute or otherwise (including the interpretation and scope of the Arbitration Clause, and the arbitrability of the claim or dispute), between you and us or our employees, agents, successors or assigns, which arises out of or relates to your credit application, purchase or condition of this vehicle, this transaction or relationship (including any such relationship with third parties who do not sign this contract) shall, at your or our election, be resolved by neutral, binding arbitration and not by a court action.

If federal law provides that a claim or dispute is not subject to binding arbitration, this Arbitration Clause shall not apply to such claim or dispute.

Any claim or dispute is to be arbitrated by a single arbitrator on an individual basis and not as a class action. You expressly waive any right you may have to arbitrate a class action.

Arbitration shall be conducted by the American Arbitration Association, 1633 Broadway, 10th Floor, New York, New York 10019 ([www.adr.org](http://www.adr.org)), or any other organization that you choose subject to our approval. You may get a copy of the rules of these organizations by contacting the arbitration organization or visiting its website.

Arbitrators shall be attorneys or retired judges and shall be selected pursuant to the applicable rules. The arbitrator shall apply governing substantive law in making an award. The arbitration hearing shall be conducted in the federal district in which you reside unless the Creator-Seller is a party to the claim or dispute, in which case the hearing will be held in the federal district where this contract was executed.

We will advance your filing, administration, service or case management fee and your arbitrator or hearing fee all up to a maximum of \$2500, which may be reimbursed by decision of the arbitrator at the arbitrator's discretion. Each party shall be responsible for its own attorney, expert and other fees, unless awarded by the arbitrator under applicable law.

If the chosen arbitration organization's rules conflict with this Arbitration Clause, then the provisions of this Arbitration Clause shall control.

The arbitrator's award shall be final and binding on all parties, except that in the event the arbitrator's award for a party is \$0 or against a party is in excess of \$100,000, or includes an award of injunctive relief against a party, that party may request a new arbitration under the rules of the arbitration organization by a three-arbitrator panel. The appealing party requesting new arbitration shall be responsible for the filing fee and other arbitration costs subject to a final determination by the arbitrators of a fair apportionment of costs.

Any arbitration under this Arbitration Clause shall be governed by the Federal Arbitration Act (9 U.S.C. § 1 et seq.) and not by any state law concerning arbitration.

You and we retain any rights to self-help remedies, such as repossession. You and we retain the right to seek remedies in small claims court for disputes or claims within that court's jurisdiction, unless such action is transferred, removed or appealed to a different court. Neither you nor we waive the right to arbitrate by using self-help remedies or filing suit.

Any court having jurisdiction may enter judgment on the arbitrator's award. This Arbitration Clause shall survive any termination, payoff or transfer of this contract.

If any part of this Arbitration Clause, other than waivers of class action rights, is deemed or found to be unenforceable for any reason, the remainder shall remain enforceable. If a waiver of class action rights is deemed or found to be unenforceable for any reason in a case in which class action allegations have been made, the remainder of this Arbitration Clause shall be enforceable. Notwithstanding any other provision of this Arbitration Clause, the validity and scope of the waiver of class action rights shall be decided by the court and not by the arbitrator.

5.  
Proof of  
Payments on  
Ford Vehicles  
by Debtors  
Brother

Check viewer

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<b>B-Z STAR INC</b> BMA & Z SHOP FOOD STORE #1 214-519-9111 3000 SIO TOWN BLVD MCKINNEY, TX 75069		11415	
PAY TO THE ORDER OF <u>CSC LOGIC INC</u>		DATE <u>07-8-19</u>	AMOUNT <u>\$ 860.00</u>
<u>EIGHT HUNDRED SIXTY DOLLARS</u>		DOLLARS	
State Bank of Texas		Signature	
FOR <u>Payment</u>		5 100000800007	

Check viewer

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<b>B-Z STAR INC</b> B&B STAR FOOD STORE #1 P.O. BOX 5211 2000 S.W. TOWN BLVD MCKINNEY, TX 75069		<b>11355</b>	
DATE <u>6-11-19</u>		SS: 874591116	
PAY TO THE ORDER OF <u>CSC LOGIC INC</u>		<u>15880.00</u>	
<u>Eight Thousand Eight Hundred Eighty Dollars</u>		DOLLARS	
State Bank of Texas		<u>J. Davis</u>	
FOR <u>[REDACTED]</u>		/000000A0000/	

Check viewer

00999

**B-Z STAR INC**  
B&B SHOP FOOD STORE #1  
214-222-5811  
3820 BIG TOWN BLVD  
MCKINNEY, TX 75160

11303

DATE 5-6-19 SS-17407118

PAY TO THE ORDER OF CSC LOGIC INC \$ 860.00

Eight Hundred Sixty (DOLLARS)

State Bank of Texas

FOR [REDACTED]

7000000460007



# 6. Final Judgement in the Ropal Lawsuite

Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**FINAL JUDGMENT ON AWARD OF ARBITRATOR**

On March 7, 2019, the Court held a hearing on the Application for Order Confirming Award of Arbitrator and Final Judgment filed by Ropal Entertainment, LLC. Counsel for Ropal Entertainment appeared in person; Hiba Entertainment, Inc. appeared/did not appear through counsel; Mohammad Nasir Siddiqi appeared/did not appear in person or through counsel; and Azhar Qasmi appeared/did not appear in person or through counsel. Upon consideration of the Application and the arguments of counsel, the Court granted the Application, and entered an Order Confirming Award of Arbitrator. Based on that Application and Order, the Court makes and enters this Final Judgment.

It is ORDERED, ADJUDGED AND DECREED that Ropal Entertainment, LLC, shall recover of and from Hiba Entertainment, Inc., Mohammad Nasir Siddiqi, and Azhar Qasmi, jointly and severally, the sum of \$375,000.00.

**FINAL JUDGMENT ON AWARD OF ARBITRATOR - Page 1**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

It is further ORDERED that Ropal Entertainment, LLC, shall recover of and from Hiba Entertainment, Inc. and Azhar Qasmi, jointly and severally, the additional sum of \$37,500.00.

It is further ORDERED that Ropal Entertainment, LLC, shall recover of and from Hiba Entertainment, Inc., Mohammad Nasir Siddiqi, and Azhar Qasmi, jointly and severally, the sum of \$94,516.50, for attorney's fees incurred through entry of the Final Award of Arbitrator.

It is further ORDERED that Ropal Entertainment, LLC, shall recover of and from Hiba Entertainment, Inc., Mohammad Nasir Siddiqi, and Azhar Qasmi, jointly and severally, the sum of \$18,250.00 in administrative fees and costs and Arbitrator compensation incurred in the arbitration.

It is further ORDERED that Ropal Entertainment, LLC, shall recover of and from Hiba Entertainment, Inc., Mohammad Nasir Siddiqi, and Azhar Qasmi, jointly and severally, the additional sum of \$307.00, as costs expended or incurred in connection with this Application for Final Judgment Confirming Award of Arbitrator, as provided by CPRC §171.092.

It is further ORDERED that all amounts awarded by this Final Judgment shall bear post-judgment interest at the rate of 5% per annum from the date this Final Judgment is signed until the date the amounts awarded hereby are paid in full.

It is further ORDERED that all writs and processes necessary for the collection or enforcement of the Award of Arbitrator and this Final Judgment Confirming Award of Arbitrator shall issue as are necessary.

This is a final judgment intended to dispose of all issues between all parties. All relief requested by any party which is not specifically granted by this Final Judgment is specifically

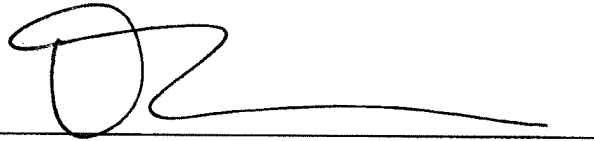
**FINAL JUDGMENT ON AWARD OF ARBITRATOR - Page 2**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas



denied. This Final Judgment is appealable.

Signed March 7, 2019.

A handwritten signature in black ink, consisting of a large, stylized 'O' followed by a horizontal line extending to the right.

Honorable Judge Presiding

# 7. Divorce Decree

NO. 10-09628

IN THE MATTER OF  
THE MARRIAGE OF

\*

IN THE DISTRICT COURT

JAMELA SIDDIQI

\*

OF DALLAS COUNTY TEXAS

AND

MUHAMMAD N. SIDDIQI

\*

303<sup>rd</sup> JUDICIAL DISTRICT

FINAL DECREE OF DIVORCE

On this day, this matter came on to be heard.

Petitioner, JAMELA SIDDIQI, appeared in person and by attorney, and announced ready.

Respondent, MUHAMMAD N. SIDDIQI, waived issuance of citation by waiver duly filed and has indicated his agreement to the terms of this decree, to the extent permitted by law, through his signature at the end of this decree.

The record of testimony was duly reported by the Court Reporter of the 303<sup>rd</sup> District Court.

The Court finds that the pleadings of the parties are in due form and contain all the allegations, information, and prerequisites required by law. The Court, after receiving evidence, finds that it has jurisdiction over this cause of action and the parties and that at least 60 days have elapsed since the date this suit was filed. The Court finds that Petitioner has been a domiciliary of this state for at least a six-month period preceding the filing of this action and a resident of the county in which this suit is filed for at least a 90-day period preceding the filing of this action. All persons entitled to citation were properly cited.

A jury was waived, and all questions of fact and of law were submitted to the Court.

It is ORDERED AND DECREED that JAMELA SIDDIQI, Petitioner, and MUHAMMAD N. SIDDIQI, Respondent, are divorced and that the marriage between them is dissolved.

The Court finds that there is no child of this marriage and that none is expected.

DIVISION OF COMMUNITY ESTATE

The Court finds that the following is a just and right division of the parties' marital estate, having due regard for the rights of each party.

It is ORDERED AND DECREED that the estate of the parties is divided as follows:

Petitioner is awarded the following as Petitioner's sole and separate property, and Respondent is divested of all right, title, interest, and claim in and to such property:

The following real property, including but not limited to escrow funds, prepaid insurance, utility deposits, keys, house plans, warranties and service contracts, and title and closing documents: house and lot at 14411 Tanglewood Drive, Farmers Branch, Texas 75234, and more particularly described as Lot 14, Block 3, of Brookhaven Hills Addition, an Addition to the City of Farmers Branch, Dallas County, Texas, according to the Plat thereof recorded in Volume 51, Page 207, of the Map Records of Dallas County, Texas.

All household furniture, furnishings, fixtures, goods, appliances, and equipment in the possession of or subject to Petitioner's sole control.

All clothing, jewelry, and other personal effects in the possession of or subject to Petitioner's sole control.

Any and all sums of cash in the possession or subject to the sole control of Petitioner, including money on account in banks, savings institutions, or other financial institutions, which accounts stand in Petitioner's sole name or from which Petitioner has the sole right to withdraw funds or which are subject to Petitioner's sole control.

Any and all sums, whether matured or unmatured, accrued or unaccrued, vested or otherwise, together with all increases thereof, the proceeds therefrom, and any other rights related to any profit-sharing plan, retirement plan, pension plan, employee stock option plan, employee savings plan, accrued unpaid bonuses, or other benefit program existing by reason of Petitioner's past, present or future employment.

Any and all individual retirement accounts, simplified employee pensions, annuities, and variable annuity life insurance benefits in Petitioner's name.

All brokerage accounts, stocks, bonds, mutual funds, and securities registered in Petitioner's name, together with all dividends, splits, and other rights and privileges in connection with them.

Any and all benefits arising out of union memberships in Petitioner's name.

Any and all policies of life insurance insuring Petitioner's life.

Respondent is awarded the following as Respondent's sole and separate property, and Petitioner is hereby divested of all right, title, interest, and claim in and to such property:

The following real property, including but not limited to escrow funds, prepaid insurance, utility deposits, keys, house plans, warranties and service contracts, and title and closing documents: house and lot at 1109 Lakestream Drive, Plano, Texas 75075, and being more particularly described as BEING Lot 3, in Block B, of CREEKBEND ESTATES, PHASE 1, an addition to the City of Plano, Collin County, Texas, according to the Map thereof recorded in Volume H, page 247, of the Map Records of Collin County, Texas.

All household furniture, furnishings, fixtures, goods, appliances, and equipment in the possession of or subject to Respondent's sole control.

All clothing, jewelry, and other personal effects in the possession of or subject to Respondent's sole control.

Any and all sums of cash in the possession or subject to the sole control of Respondent, including money on account in banks, savings institutions, or other financial institutions, which accounts stand in Respondent's sole name or from which Respondent has the sole right to withdraw funds or which are subject to Respondent's sole control.

Any and all sums, whether matured or unmatured, accrued or unaccrued, vested or otherwise, together with all increases thereof, the proceeds therefrom, and any other rights related to any profit-sharing plan, retirement plan, pension plan, employee stock option plan, employee savings plan, accrued unpaid bonuses, or other benefit program existing by reason of Respondent's past, present or future employment.

Any and all individual retirement accounts, simplified employee pensions, annuities, and variable annuity life insurance benefits in Respondent's name.

All brokerage accounts, stocks, bonds, mutual funds, and securities registered in Respondent's name, together with all dividends, splits, and other rights and privileges in connection with them.

Any and all benefits arising out of union memberships in Respondent's name.

Any and all policies of life insurance insuring the life of Respondent.

The Respondent's motor vehicle together with all prepaid insurance, keys and title documents.

It is further ORDERED AND DECREED that Petitioner and Respondent, and each of them, execute any and all documents necessary and proper to fulfill the division of property above awarded, and further have any writs, executions and process, as many and as often as necessary, to fulfill the provisions of this Decree.

It is ORDERED AND DECREED that Petitioner shall pay, as a part of the division of the estate of the parties, the following debts and obligations and shall indemnify and hold Respondent and Respondent's property harmless from any failure to do so and discharge these debts and obligations:

The balance due, including principal, interest, tax, and insurance escrow, on that certain promissory note, dated April 19, 2002, executed by Muhammad Siddiqi, payable to SEBRING CAPITAL CORPORATION, and secured by deed of trust on the real property herein awarded to Petitioner and recorded in the Deed of Trust records of Dallas County, Texas.

Any and all debts, charges, liabilities, and other obligations standing solely in Petitioner's name and those incurred solely by Petitioner from and after October 1, 2007, unless express provision is made in this decree to the contrary.

All encumbrances, ad valorem taxes, liens, assessments, or other charges due or to become due on the real and personal property awarded to Petitioner in this decree unless express provision is made herein to the contrary.

It is ORDERED AND DECREED that Respondent shall pay, as a part of the division of the estate of the parties, the following debts and obligations and shall indemnify and hold Petitioner and Petitioner's property harmless from any failure to do so and discharge these debts and obligations:

The balance due, including principal, interest, tax, and insurance escrow, on that certain promissory note, dated August 7, 2008, executed by Jamela Siddiqi and spouse Muhammad Siddiqi, payable to WACHOVIA MORTGAGE, FSB, in the original principal amount of \$218,250.00, and secured by deed of trust on the real property herein awarded to Respondent and recorded in the Deed of Trust records of Collin County, Texas.

Any and all debts, charges, liabilities and other obligations standing solely in Respondent's incurred solely by Respondent from and after October 1, 2007 unless express provision is made in this decree to the contrary.

All encumbrances, ad valorem taxes, liens, assessments, or other charges due or to become due on the real and personal property awarded to Respondent in this decree unless express provision is made herein to the contrary.

It is further ORDERED AND DECREED that each party shall keep and preserve for a period of four years from the date of divorce all financial records relating to the community estate, and each party is ORDERED AND DECREED to allow the other party access to these records in the event of any tax audits.

It is ORDERED AND DECREED that each party shall furnish to the other party all financial records relating to acquisition dates, basis, and recapture information concerning property in which the community has had an interest.

It is ORDERED AND DECREED, as a part of the division of the estate of the parties, that any community property or its value not otherwise awarded by this decree is subject to future division as provided by the Texas Family Code.

It is further ORDERED AND DECREED, as a part of the division of the estate of the parties, that any community liability not expressly assumed by a party under this decree is to be paid by the party incurring the liability.

It is ORDERED AND DECREED that each party shall send to the other party within five days of its receipt, a copy of any correspondence from a creditor or taxing authority concerning any potential liability of the other party.

This decree shall serve as a muniment of title to transfer ownership of all property awarded to any party in this decree.

It is ORDERED AND DECREED that the following property is confirmed as Petitioner's separate property and estate: real property located at 1917 Crosby Road, Carrollton, Texas 75006, 2000 Ford Explorer, and the business known as "EAGLE PROTECTIVE GROUP DBA EAGLE PROTECTIVE GROUP, INC.," including but not limited to all furniture, fixtures, machinery, equipment, inventory, cash, receivables, contracts, accounts, goods, and supplies; all personal property used in connection with the operation of the business; and all rights and privileges, past, present, or future, arising out of or in connection with the operation of the business.

It is ORDERED AND DECREED that Petitioner's name is restored to JAMELA MOONAN.



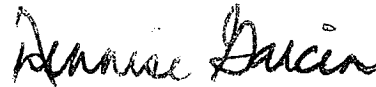
Each party is ORDERED to be solely responsible for and pay all attorney's fees incurred by that party in this cause.

Costs of Court are to be borne by the party by whom incurred.

Without affecting the finality of this Decree of Divorce, this Court expressly reserves the right to make orders necessary to clarify and enforce this decree.

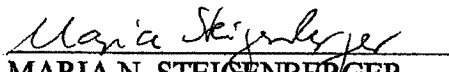
It is ORDERED AND DECREED that all relief requested in this cause and not expressly granted is denied.

SIGNED on July 26, 2010.

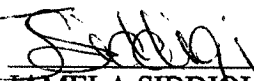



JUDGE PRESIDING

APPROVED AS TO FORM ONLY:

  
MARIA N. STEIGENBERGER  
SBN: 19126450  
Attorney for Petitioner

APPROVED AS TO BOTH FORM AND SUBSTANCE:

  
JAMELA SIDDIQI, Petitioner

  
MUHAMMAD N. SIDDIQI, Respondent

STATE OF TEXAS }  
COUNTY OF DALLAS }

I, GARY FITZSIMMONS, Clerk of the District  
Courts of Dallas County, Texas, do hereby  
certify that this is a true and correct copy of the original  
as appears of record in my office.

GIVEN UNDER MY HAND AND SEAL of  
said Court at Dallas, Texas,  
this 26 day of July  
A.D., 2020

GARY FITZSIMMONS, DISTRICT CLERK  
DALLAS COUNTY, TEXAS

BY [Signature] Deputy

# 8. Bank Statements



Manage your account online:  
www.chase.com

Customer Service:  
1-800-946-5538

Mobile: Download the  
Chase Mobile® app today

October 2019						
S	M	T	W	T	F	S
29	30	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

New Balance  
**\$16,162.34**  
Minimum Payment Due  
**\$733.00**  
Payment Due Date  
**10/20/19**

## CHASE ULTIMATE REWARDS® SUMMARY

Previous points balance	5,367
+ 1 Point per \$1 earned on all purchases	1,218
+ 4 Pts per \$1 internet, cable, phone, etc. sply	2,682
+ 1 Point per \$1 on gas stns & restaurants	0
- Points redeemed this statement period	5,300

**Total points available for redemption 3,967**

**Late Payment Warning:** If we do not receive your minimum payment by the due date, you may have to pay up to a \$39 late fee.  
**Minimum Payment Warning:** Enroll in Auto-Pay and avoid missing a payment. To enroll, call the number on the back of your card or go to the web site listed above.

## ACCOUNT SUMMARY

Account Number:	3191
Previous Balance	\$14,711.77
Payment, Credits	\$0.00
Purchases	+\$1,217.54
Cash Advances	\$0.00
Balance Transfers	\$0.00
Fees Charged	+\$39.00
Interest Charged	+\$194.03
<b>New Balance</b>	<b>\$16,162.34</b>
Opening/Closing Date	09/27/19 - 09/26/19
Revolving Credit Amount	\$16,000
Available Credit	\$0
Cash Access Line	\$3,200
Available for Cash	\$0
<b>Past Due Amount</b>	<b>\$339.00</b>
<b>Balance over the Credit Access Line</b>	<b>\$162.34</b>

## YOUR ACCOUNT MESSAGES

You are over your credit line/credit access line by \$162.34. You can pay down your balance faster by including this amount with your payment.

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Page 1 of 2

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P.O. BOX 15123  
WILMINGTON, DE 19850-5123  
For Undeliverable Mail Only

The Past Due  
amount of \$339.00 is  
Included in your  
Minimum Payment.

**Payment Due Date: 10/20/19**  
**New Balance: \$16,162.34**  
**Minimum Payment: \$733.00**

Account number 3191

\$ Amount Enclosed  
Make/Mail to Chase Card Services at the address below:



CARDMEMBER SERVICE  
PO BOX 6294  
CAROL STREAM IL 60197-6294





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

October 23, 2019 through November 19, 2019

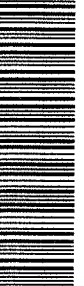
Account Number: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412



### We want to remind you about the overdraft service options that are available for your personal checking account(s)

We've included information on the last page of this statement to remind you of our overdraft services and associated fees. You can find more information about these services and ways to avoid overdraft fees at [chase.com/overdraft-services](https://chase.com/overdraft-services).

If you have questions, please call us at the number on your statement.

#### CHECKING SUMMARY

Chase Premier Plus Checking

	AMOUNT
<b>Beginning Balance</b>	<b>-\$291.59</b>
Deposits and Additions	325.59
Fees	-34.00
<b>Ending Balance</b>	<b>\$0.00</b>
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.17

#### DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
11/19	Overdraft Write-Off Please Contact Bank	\$325.59
<b>Total Deposits and Additions</b>		<b>\$325.59</b>

#### FEES

DATE	DESCRIPTION	AMOUNT
11/05	Returned Item Fee For An Unpaid \$199.00 Item - Details: Nfm PPD ID: 1490000027	\$34.00
<b>Total Fees</b>		<b>\$34.00</b>



October 23, 2019 through November 19, 2019

Account Number: [REDACTED] 1773

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$0.00	\$476.00
Total Returned Item Fees	\$34.00	\$680.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



October 23, 2019 through November 19, 2019

Account Number: [REDACTED] 1773

## Overdraft and Overdraft Fee Information for Your Chase Checking Account

### What You Need to Know About Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection through a link to a Chase savings account, which may be less expensive than our standard overdraft practices. You can contact us to learn more.

This notice explains our standard overdraft practices.



- **What are the standard overdraft practices that come with my account?**

We **do** authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Recurring debit card transactions

We **do not** authorize and pay overdrafts for the following types of transactions, unless you ask us to (see below):

- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction. If we do not authorize and pay an overdraft, your transaction will be declined.

- **What fees will I be charged if Chase pays my overdraft?**

Under our standard overdraft practices:

- If we pay an item, we'll charge you a \$34 Insufficient Funds Fee per item. This fee is not charged if your account balance at the end of the business day is overdrawn by \$5 or less, or for items that are \$5 or less.
- We won't charge more than three Insufficient Funds Fees per day, for a total of \$102.

- **We waive fees for some account types:**

- For Chase Sapphire<sup>SM</sup> Checking accounts, we waive the Insufficient Funds and Returned Item fees if items(s) are presented or withdrawal request(s) are made against an account with insufficient funds on four or fewer business days in the past 12 months.
- For Chase Private Client Checking<sup>SM</sup> accounts, we waive the Chase overdraft fees.

- **What if I want Chase to authorize and pay overdrafts on my everyday debit card transactions?**

If you or a joint account owner would like to change your selection, sign in to chase.com to update your account settings, or call us at 1-800-935-9935 (or collect at 1-713-262-1679 if outside the U.S.), or visit a Chase branch. We accept operator relay calls.



October 23, 2019 through November 19, 2019

Account Number: [REDACTED] 1773

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

September 24, 2019 through October 22, 2019

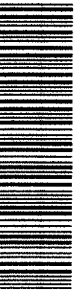
Primary Account: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-935-9935**  
Deaf and Hard of Hearing: **1-800-242-7383**  
Para Espanol: **1-877-312-4273**  
International Calls: **1-713-262-1679**

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412



### Good news! We're making it easier to get a replacement account number if your account is compromised.

Starting November 17, 2019, if your account is compromised, we can simply issue you a replacement account number without the hassle of closing your existing account and opening a new one. This will allow you to continue using your existing debit card.

We've updated our Deposit Account Agreement to explain this change:

*We can assign and transfer your account information and documentation to a replacement account number at our discretion. We may make this assignment when your account is reported compromised by you or any signer. If we issue you a replacement account number, this Deposit Account Agreement governing you and your account will continue to apply, without interruption, as if you retained the discontinued account number.*

Please call us at the number at the top of this statement if you have any questions.

### CONSOLIDATED BALANCE SUMMARY

#### ASSETS

##### Checking & Savings

	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Plus Checking	[REDACTED] 773	-\$62.59	-\$291.59
Chase Plus Savings	[REDACTED] 037	32.60	32.60
<b>Total</b>		<b>-\$29.99</b>	<b>-\$258.99</b>
<b>TOTAL ASSETS</b>		<b>-\$29.99</b>	<b>-\$258.99</b>



September 24, 2019 through October 22, 2019

Primary Account: [REDACTED] 21773

## CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 1773

### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>-\$62.59</b>
Fees	-229.00
<b>Ending Balance</b>	<b>-\$291.59</b>
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.17

### FEES

DATE	DESCRIPTION	AMOUNT
09/26	Returned Item Fee For An Unpaid \$373.04 Item - Details: Grayson-Collin Elec Paymt PPD ID: 1750300645	\$34.00
10/03	Returned Item Fee For An Unpaid \$199.00 Item - Details: Nfm Payment PPD ID: 1490000027	34.00
10/07	Returned Item Fee For An Unpaid \$439.00 Item - Details: Discover Payments 5319 Web ID: 3510020270	34.00
10/16	Returned Item Fee For An Unpaid \$47.85 Item - Details: Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	34.00
10/17	Returned Item Fee For An Unpaid \$86.97 Item - Details: Citi Autopay Retry Pymt 083090547222778 Tel ID: Citicardap	34.00
10/21	Returned Item Fee For An Unpaid \$500.00 Item - Details: American Express Retry Pymt PPD ID: 9493560001	34.00
10/22	Monthly Service Fee	25.00
<b>Total Fees</b>		<b>\$229.00</b>

#### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was -\$114.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**



September 24, 2019 through October 22, 2019

Primary Account: [REDACTED] 1773

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$0.00	\$476.00
Total Returned Item Fees	\$204.00	\$646.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

## CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 5037

## SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$32.60
Ending Balance	\$32.60
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.  
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



September 24, 2019 through October 22, 2019

Primary Account: [REDACTED] 1773

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

August 22, 2019 through September 23, 2019

Primary Account: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412

#### CONSOLIDATED BALANCE SUMMARY

##### ASSETS

##### Checking & Savings

##### ACCOUNT

##### BEGINNING BALANCE THIS PERIOD

##### ENDING BALANCE THIS PERIOD

Chase Premier Plus Checking

[REDACTED] 21773

\$1,846.16

-\$62.59

Chase Plus Savings

[REDACTED] 55037

32.60

32.60

Total

\$1,878.76

-\$29.99

TOTAL ASSETS

\$1,878.76

-\$29.99

#### CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 773

#### CHECKING SUMMARY

	AMOUNT
Beginning Balance	\$1,846.16
Deposits and Additions	9,182.77
Checks Paid	-100.00
Electronic Withdrawals	-8,564.75
Other Withdrawals	-2,129.77
Fees	-297.00
Ending Balance	-\$62.59
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	\$0.01
Interest Paid Year-to-Date	\$0.17



August 22, 2019 through September 23, 2019

Primary Account: [REDACTED] 1773

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	PPD ID: 9111111101	AMOUNT
08/22	Eagle Protective Direct Dep		\$2,641.38
08/26	ATM Check Deposit 08/24 819 S Allen Heights DR Allen TX Card 3110		3,400.00
08/26	ATM Cash Deposit 08/24 819 S Allen Heights DR Allen TX Card 3110		500.00
09/05	Eagle Protective Direct Dep	PPD ID: 9111111101	2,641.38
09/23	Interest Payment		0.01
<b>Total Deposits and Additions</b>			<b>\$9,182.77</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1576 ^		08/22	\$100.00
<b>Total Checks Paid</b>			<b>\$100.00</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

^ An image of this check may be available for you to view on Chase.com.

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	Web ID: 9Redep	AMOUNT
08/26	Affiliated Bank 1 Time Dft 0073249344		\$7,818.19
08/26	Grayson-Collin Elec Paymt	PPD ID: 1750300645	297.61
08/26	Paypal Inst Xfer Benbarrick	Web ID: Paypalsi77	7.95
09/03	Discover E-Payment 5319	Web ID: 2510020270	441.00
<b>Total Electronic Withdrawals</b>			<b>\$8,564.75</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
09/09	Coal-29Aug19-1376	\$2,129.77
<b>Total Other Withdrawals</b>		<b>\$2,129.77</b>

## FEES

DATE	DESCRIPTION	AMOUNT
08/30	Returned Item Fee For An Unpaid \$3,846.07 Item - Details: Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Redep	\$34.00
09/03	Insufficient Funds Fee For A \$441.00 Item - Details: Discover E-Payment 5319 Web ID: 2510020270	34.00
09/09	Returned Item Fee For An Unpaid \$32.10 Item - Details: Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	34.00
09/09	Returned Item Fee For An Unpaid \$21.00 Item - Details: Coserv Od Cw Aw Bill Pay 12091550611 Web ID: 7529027011	34.00
09/11	Returned Item Fee For An Unpaid \$89.14 Item - Details: Citi Autopay Payment 083064627280546 Tel ID: Citicardap	34.00
09/16	Returned Item Fee For An Unpaid \$500.00 Item - Details: American Express ACH Pmt PPD ID: 9493560001	34.00



August 22, 2019 through September 23, 2019

Primary Account [REDACTED] 1773

## FEES (continued)

DATE	DESCRIPTION	AMOUNT
09/17	Returned Item Fee For An Unpaid \$39.95 Item - Details: Nafmd Phonecheck Tel ID: 3383693141	34.00
09/23	Returned Item Fee For An Unpaid Check #1228 IN The Amount of \$35.19	34.00
09/23	Monthly Service Fee	25.00
<b>Total Fees</b>		<b>\$297.00</b>

## WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was \$929.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$34.00	\$476.00
Total Returned Item Fees	\$238.00	\$442.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

## CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 5037

## SAVINGS SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$32.60</b>
<b>Ending Balance</b>	<b>\$32.60</b>
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.



August 22, 2019 through September 23, 2019

Primary Account [REDACTED] 773

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.

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**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt. For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

July 23, 2019 through August 21, 2019  
Primary Account: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412

#### CONSOLIDATED BALANCE SUMMARY

##### ASSETS

##### Checking & Savings

	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Plus Checking	[REDACTED] 21773	\$1,499.43	\$1,846.16
Chase Plus Savings	[REDACTED] 55037	32.60	32.60
<b>Total</b>		<b>\$1,532.03</b>	<b>\$1,878.76</b>

##### TOTAL ASSETS

**\$1,532.03** **\$1,878.76**

#### CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 773

#### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$1,499.43</b>
Deposits and Additions	20,282.77
Checks Paid	-1,899.34
ATM & Debit Card Withdrawals	-2,306.46
Electronic Withdrawals	-15,229.24
Fees	-501.00
<b>Ending Balance</b>	<b>\$1,846.16</b>
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	\$0.01
Interest Paid Year-to-Date	\$0.16

Your account ending in 5037 is linked to this account for overdraft protection.



July 23, 2019 through August 21, 2019  
Primary Account [REDACTED] 1773

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	PPD ID: 9111111101	AMOUNT
07/25	Eagle Protective Direct Dep		\$2,641.38
08/02	Remote Online Deposit 1		5,000.00
08/08	Remote Online Deposit 1		5,000.00
08/08	Eagle Protective Direct Dep	PPD ID: 9111111101	2,641.38
08/19	Remote Online Deposit 1		5,000.00
08/21	Interest Payment		0.01
<b>Total Deposits and Additions</b>			<b>\$20,282.77</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
916 ^		08/13	\$500.00
1136 * ^		08/21	28.66
1308 * ^		07/23	30.68
1756 * ^		07/29	320.00
1783 * ^		08/12	130.00
1787 * ^		08/20	890.00
<b>Total Checks Paid</b>			<b>\$1,899.34</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
07/26	Card Purchase 07/25 Att Ford 1X 800-331-0500 TX Card 3110	\$267.24
07/26	Non-Chase ATM Withdraw 07/26 820 N Fitzhugh Ave Dallas TX Card 3110	62.50
07/29	Card Purchase 07/25 NM Last Call #51 214-5131527 TX Card 3110	147.76
07/29	Card Purchase 07/25 NM Last Call #51 214-5131527 TX Card 3110	63.65
07/29	Card Purchase With Pin 07/29 Mgi # 10 1621 N Centra Richardson TX Card 3110	815.07
07/29	Card Purchase With Pin 07/29 Wm Supercenter # Lucas TX Card 3110	212.16
07/30	Non-Chase ATM Withdraw 07/30 2340 West Nw Hwy. Dallas TX Card 3110	132.00
07/31	Card Purchase 07/30 Tmc Restaurant of Dall 214-9568800 TX Card 3110	167.46
08/05	Card Purchase 08/03 Dallas Food & Beverage Dallas TX Card 3110	438.62
<b>Total ATM &amp; Debit Card Withdrawals</b>		<b>\$2,306.46</b>

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
07/23	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	\$560.24
07/23	Grayson-Collin Elec Paymt PPD ID: 1750300645	249.40
07/31	Capital One Phone Pymt 921139860006470 Tel ID: 9541719986	1,000.00
08/05	Cadence Bank ACH 713-871-4012 Tel ID: 1640156695	3,418.18
08/05	Discover Payments 5319 Web ID: 3510020270	445.00
08/05	Nfm Payment PPD ID: 1490000027	199.00



July 23, 2019 through August 21, 2019  
Primary Account: [REDACTED] 1773

## ELECTRONIC WITHDRAWALS *(continued)*

DATE	DESCRIPTION	AMOUNT
08/06	TD Auto Finance Web Pay 0001102822336 Web ID: 5202614244	1,360.80
08/09	Pace Web ACH 9Stdactach 121643 Web ID: 5135562314	7,000.00
08/09	Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	34.56
08/12	Chase Credit Crd Autopay PPD ID: 4760039224	163.00
08/12	Coserv Od Cw Aw Bill Pay 12033459161 Web ID: 7529027011	25.00
08/13	Citi Autopay Payment 083039629880985 Tel ID: Citicardap	83.80
08/16	American Express ACH Pmt PPD ID: 9493560001	500.00
08/16	Nafmd Phonecheck Tel ID: 3383693141	39.95
08/21	Neiman Marcus Online Pmt 000001939936178 Web ID: 9541719427	150.31
<b>Total Electronic Withdrawals</b>		<b>\$15,229.24</b>

## FEES

DATE	DESCRIPTION	AMOUNT
07/24	Returned Item Fee For An Unpaid \$4,046.07 Item - Details: Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Redep	\$34.00
08/06	Insufficient Funds Fee For A \$1,360.80 Item - Details: TD Auto Finance Web Pay 0001102822336 Web ID: 5202614244	34.00
08/07	Returned Item Fee For An Unpaid \$1,707.09 Item - Details: Cadence Bank ACH 713-871-4012 Tel ID: 1640156695	34.00
08/09	Insufficient Funds Fee For A \$7,000.00 Item - Details: Pace Web ACH 9Stdactach 121643 Web ID: 5135562314	34.00
08/09	Insufficient Funds Fee For A \$34.56 Item - Details: Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	34.00
08/12	Insufficient Funds Fee For Check #1783 IN The Amount of \$130.00	34.00
08/12	Insufficient Funds Fee For A \$25.00 Item - Details: Coserv Od Cw Aw Bill Pay 12033459161 Web ID: 7529027011	34.00
08/13	Insufficient Funds Fee For Check #916 IN The Amount of \$500.00	34.00
08/13	Insufficient Funds Fee For A \$83.80 Item - Details: Citi Autopay Payment 083039629880985 Tel ID: Citicardap	34.00
08/14	Returned Item Fee For An Unpaid Check #1782 IN The Amount of \$865.00	34.00
08/16	Insufficient Funds Fee For A \$500.00 Item - Details: American Express ACH Pmt PPD ID: 9493560001	34.00
08/16	Returned Item Fee For An Unpaid \$141.59 Item - Details: City of Parker Parker PPD ID: 751382954	34.00
08/16	Insufficient Funds Fee For A \$39.95 Item - Details: Nafmd Phonecheck Tel ID: 3383693141	34.00
08/21	Returned Item Fee For An Unpaid \$7,818.19 Item - Details: Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Dft4	34.00
08/21	Monthly Service Fee	25.00
<b>Total Fees</b>		<b>\$501.00</b>



July 23, 2019 through August 21, 2019  
Primary Account [REDACTED] 1773

#### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was \$1,092.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**

#### OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$306.00	\$442.00
Total Returned Item Fees	\$170.00	\$204.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

#### CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 5037

#### SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$32.60
Ending Balance	\$32.60
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.



July 23, 2019 through August 21, 2019  
Primary Account [REDACTED] 1773

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

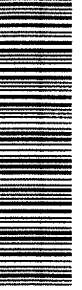
- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC





July 23, 2019 through August 21, 2019  
Primary Account: [REDACTED] 773

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

June 22, 2019 through July 22, 2019  
Primary Account [REDACTED] 773

#### CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-935-9935**  
Deaf and Hard of Hearing: **1-800-242-7383**  
Para Espanol: **1-877-312-4273**  
International Calls: **1-713-262-1679**

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412

#### CONSOLIDATED BALANCE SUMMARY

##### ASSETS

##### Checking & Savings

	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Plus Checking	[REDACTED] 1773	\$223.62	\$1,499.43
Chase Plus Savings	[REDACTED] 5037	32.60	32.60
<b>Total</b>		<b>\$256.22</b>	<b>\$1,532.03</b>

##### TOTAL ASSETS

**\$256.22** **\$1,532.03**

#### CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 1773

#### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$223.62</b>
Deposits and Additions	19,803.77
Checks Paid	-680.00
ATM & Debit Card Withdrawals	-213.65
Electronic Withdrawals	-5,191.31
Other Withdrawals	-12,350.00
Fees	-93.00
<b>Ending Balance</b>	<b>\$1,499.43</b>
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	\$0.01
Interest Paid Year-to-Date	\$0.15

Your account ending in 5037 is linked to this account for overdraft protection.



June 22, 2019 through July 22, 2019  
Primary Account [REDACTED] 1773

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
06/25	ATM Cash Deposit 06/24 161 W Spring Creek Pkwy Plano TX Card 3110	\$500.00
06/27	Deposit 1860836432	525.00
06/27	Eagle Protective Direct Dep PPD ID: 9111111101	2,641.38
07/08	Quickpay With Zelle Payment From Arlene Moonan Wfct06Hpcqp9	1,000.00
07/11	Deposit 1054972605	8,496.00
07/11	Deposit 1054972547	4,000.00
07/11	Eagle Protective Direct Dep PPD ID: 9111111101	2,641.38
07/22	Interest Payment	0.01
<b>Total Deposits and Additions</b>		<b>\$19,803.77</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
915 ^		07/15	\$500.00
1573 * ^		06/27	50.00
1776 * ^		07/15	130.00
<b>Total Checks Paid</b>			<b>\$680.00</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/24	Card Purchase With Pin 06/22 7-Eleven 32723 Plano TX Card 3110	\$49.99
06/24	Card Purchase 06/22 Cheeky Monkey Fairview Fairview TX Card 3110	8.65
06/25	Card Purchase With Pin 06/25 Specs #128 15055 Inwoo Addison TX Card 3110	112.02
06/26	Card Purchase 06/24 Qt 926 08009268 Allen TX Card 3110	6.10
06/27	Card Purchase With Pin 06/27 Wal-Mart #5672 Lucas TX Card 3110	36.89
<b>Total ATM &amp; Debit Card Withdrawals</b>		<b>\$213.65</b>

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/25	Grayson-Collin Elec Paymt PPD ID: 1750300645	\$167.72
06/25	A.R.M. Solutions Preauthpmt Pns* Arm Soluti Tel ID: 1273535182	147.03
06/26	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
07/03	Nfm Payment PPD ID: 1490000027	199.00
07/09	Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	28.82
07/09	Coserv Od Cw Aw Bill Pay 11971282441 Web ID: 7529027011	21.00
07/11	Neiman Marcus Online Pmt 000001931176888 Web ID: 9541719427	200.00
07/11	Chase Credit Crd Autopay 000000000245719 PPD ID: 4760039224	168.00
07/11	Citi Autopay Payment 083011059041736 Tel ID: Citicardap	118.96
07/12	Quickpay With Zelle Payment To Guy Cannon 8426092861	200.00
07/16	Quickpay With Zelle Payment To Guy Cannon 8438698515	200.00





June 22, 2019 through July 22, 2019  
Primary Account: [REDACTED] 1773

## ELECTRONIC WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
07/16	American Express ACH Pmt PPD ID: 9493560001	500.00
07/16	City of Parker Parker PPD ID: 751382954	141.59
07/16	Nafmd Phonecheck Tel ID: 3383693141	39.95
07/17	Quickpay With Zelle Payment To Guy Cannon 8441353969	100.00
07/17	American Express ACH Pmt W6794 Web ID: 2005032111	2,000.00
07/18	Quickpay With Zelle Payment To Guy Cannon 8443436515	399.00
<b>Total Electronic Withdrawals</b>		<b>\$5,191.31</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/27	06/27 Withdrawal	\$2,350.00
07/11	07/11 Withdrawal	10,000.00
<b>Total Other Withdrawals</b>		<b>\$12,350.00</b>

## FEES

DATE	DESCRIPTION	AMOUNT
06/26	Insufficient Funds Fee For A \$560.24 Item - Details: U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	\$34.00
07/19	Returned Item Fee For An Unpaid \$4,046.07 Item - Details: Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Dft4	34.00
07/22	Monthly Service Fee	25.00
<b>Total Fees</b>		<b>\$93.00</b>

### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was \$1,539.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$34.00	\$136.00
Total Returned Item Fees	\$34.00	\$34.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees



June 22, 2019 through July 22, 2019  
Primary Account [REDACTED] 1773

## CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 5037

### SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$32.60
Ending Balance	\$32.60
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt. For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

May 22, 2019 through June 21, 2019  
Primary Account: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679

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MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412

#### CONSOLIDATED BALANCE SUMMARY

##### ASSETS

##### Checking & Savings

	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Plus Checking	[REDACTED] 1773	\$2,680.47	\$223.62
Chase Plus Savings	[REDACTED] 5037	32.60	32.60
<b>Total</b>		<b>\$2,713.07</b>	<b>\$256.22</b>

##### TOTAL ASSETS

**\$2,713.07** **\$256.22**

#### CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 1773

#### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$2,680.47</b>
Deposits and Additions	14,099.77
Checks Paid	-3,777.64
ATM & Debit Card Withdrawals	-432.90
Electronic Withdrawals	-12,075.08
Other Withdrawals	-178.00
Fees	-93.00
<b>Ending Balance</b>	<b>\$223.62</b>
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	\$0.01
Interest Paid Year-to-Date	\$0.14

Your account ending in 5037 is linked to this account for overdraft protection.



May 22, 2019 through June 21, 2019  
Primary Account: [REDACTED] 1773

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
05/30	Eagle Protective Direct Dep PPD ID: 9111111101	\$2,641.38
06/10	Deposit 1041940977	500.00
06/10	Quickpay With Zelle Payment From Guy G Cannon 8319297455	860.00
06/10	Quickpay With Zelle Payment From Guy G Cannon 8319291758	12.00
06/13	Eagle Protective Direct Dep PPD ID: 9111111101	2,641.38
06/17	Deposit 1047937514	6,445.00
06/21	ATM Cash Deposit 06/21 819 S Allen Heights DR Allen TX Card 3110	1,000.00
06/21	Interest Payment	0.01
<b>Total Deposits and Additions</b>		<b>\$14,099.77</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
914 ^		06/13	\$500.00
1109 * ^		06/21	27.64
1574 * ^		06/07	1,000.00
1763 * ^		05/30	2,000.00
1780 * ^		06/17	250.00
<b>Total Checks Paid</b>			<b>\$3,777.64</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
05/22	Card Purchase With Pin 05/22 Wm Supercenter # Lucas TX Card 3110	\$17.38
05/28	Card Purchase 05/24 Gt Distributors Dallas Dallas TX Card 3110	281.44
05/30	Card Purchase 05/29 Furrs 234 Dallas TX Card 3110	18.17
06/03	Card Purchase 06/02 Subway 00032631 Garland TX Card 3110	8.43
06/04	Card Purchase 06/03 Qt 926 08009268 Allen TX Card 3110	5.22
06/04	Card Purchase With Pin 06/04 Gamestop #540 3112 N J Garland TX Card 3110	6.48
06/05	Card Purchase 06/04 Gamestop #540 Garland TX Card 3110	6.48
06/06	Card Purchase 06/05 Taco Bueno Addison 1 Addison TX Card 3110	4.52
06/12	Card Purchase With Pin 06/11 Wm Supercenter # Lucas TX Card 3110	23.66
06/13	Card Purchase With Pin 06/13 Shell Service Station Addison TX Card 3110	13.58
06/14	Card Purchase 06/13 Chipotle 2816 Dallas TX Card 3110	7.52
06/17	Card Purchase 06/15 Chevron 0210336 Carrollton TX Card 3110	9.99
06/17	Card Purchase 06/15 Taco Bell #32187 Allen TX Card 3110	19.12
06/19	Card Purchase 06/18 Taco Bell 035435 Plano TX Card 3110	10.91
<b>Total ATM &amp; Debit Card Withdrawals</b>		<b>\$432.90</b>



May 22, 2019 through June 21, 2019  
Primary Account: [REDACTED] 1773

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
05/22	Quickpay With Zelle Payment To Tovar Frankarlos 8255394727	\$250.00
05/23	Grayson-Collin Elec Paymt PPD ID: 1750300645	137.34
05/30	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	560.24
05/31	Paypal Echeck 5Exj2Arxe5Rma Web ID: Paypalec88	24.95
06/04	Discover E-Payment 5319 Web ID: 2510020270	700.00
06/04	Nfm Payment PPD ID: 1490000027	199.00
06/07	Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	36.08
06/10	Coserv Od Cw Aw Bill Pay 11907580321 Web ID: 7529027011	58.00
06/11	Quickpay With Zelle Payment To Guy Cannon 8321144745	593.00
06/11	Citi Autopay Payment 082985140620981 Tel ID: Citicardap	208.50
06/11	Chase Credit Crd Autopay 000000000239931 PPD ID: 4760039224	165.00
06/17	American Express ACH Pmt PPD ID: 9493560001	500.00
06/17	Discover E-Payment 5319 Web ID: 2510020270	419.00
06/17	City of Parker Parker PPD ID: 751382954	148.41
06/18	Simmons Bank - L Tel Pmts Ykb8 Tel ID: 1710162300	2,418.74
06/18	Nafmd Phonecheck Tel ID: 3383693141	39.95
06/19	Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Dft4	4,046.07
06/19	Discover E-Payment 5319 Web ID: 2510020270	970.80
06/19	Neiman Marcus Online Pmt 000001913122494 Web ID: 9541719427	100.00
06/21	American Express ACH Pmt W8962 Web ID: 2005032111	500.00
<b>Total Electronic Withdrawals</b>		<b>\$12,075.08</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
06/10	06/10 Withdrawal	\$178.00
<b>Total Other Withdrawals</b>		<b>\$178.00</b>

## FEES

DATE	DESCRIPTION	AMOUNT
06/19	Insufficient Funds Fee For A \$970.80 Item - Details: Discover E-Payment 5319 Web ID: 2510020270	\$34.00
06/19	Insufficient Funds Fee For A \$100.00 Item - Details: Neiman Marcus Online Pmt 000001913122494 Web ID: 9541719427	34.00
06/21	Monthly Service Fee	25.00
<b>Total Fees</b>		<b>\$93.00</b>



May 22, 2019 through June 21, 2019  
Primary Account [REDACTED] 1773

#### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was \$1,874.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**

#### OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$68.00	\$102.00
Total Returned Item Fees	\$0.00	\$0.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

#### CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number [REDACTED] 5037

#### SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$32.60
Ending Balance	\$32.60
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.



May 22, 2019 through June 21, 2019  
Primary Account: [REDACTED] 1773

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

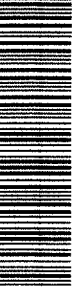
- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC





May 22, 2019 through June 21, 2019  
Primary Account [REDACTED] 1773

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

April 20, 2019 through May 21, 2019  
Primary Account: [REDACTED] 1773

#### CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-935-9935**  
Deaf and Hard of Hearing: **1-800-242-7383**  
Para Espanol: **1-877-312-4273**  
International Calls: **1-713-262-1679**

00001119 DRE 201 142 14219 NNNNNNNNNN T 1 000000000 35 0000

MUHAMMAD N SIDDIQI  
3020 BIGTOWN BLVD  
MESQUITE TX 75150-2412



### We want to remind you about the overdraft service options that are available for your personal checking account(s)

We've included information on the last page of this statement to remind you about our overdraft services and associated fees. You can find more information about these services and ways to avoid overdraft fees at [chase.com/overdraft-services](https://chase.com/overdraft-services).

If you have questions, please call us anytime at the number on your statement.

### CONSOLIDATED BALANCE SUMMARY

#### ASSETS

##### Checking & Savings

	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Plus Checking	[REDACTED] 1773	\$1,667.52	\$2,680.47
Chase Plus Savings	[REDACTED] 5037	32.60	32.60
<b>Total</b>		<b>\$1,700.12</b>	<b>\$2,713.07</b>
<b>TOTAL ASSETS</b>		<b>\$1,700.12</b>	<b>\$2,713.07</b>



April 20, 2019 through May 21, 2019  
Primary Account: [REDACTED] 1773

## CHASE PREMIER PLUS CHECKING

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 1773

### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$1,667.52</b>
Deposits and Additions	21,517.03
Checks Paid	-4,673.15
ATM & Debit Card Withdrawals	-1,290.16
Electronic Withdrawals	-9,715.77
Other Withdrawals	-4,800.00
Fees	-25.00
<b>Ending Balance</b>	<b>\$2,680.47</b>
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	\$0.02
Interest Paid Year-to-Date	\$0.13

Your account ending in 5037 is linked to this account for overdraft protection.

### DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
04/23	Remote Online Deposit 1	\$1,428.00
04/23	Deposit 1021537007	4.25
04/25	Remote Online Deposit 1	3,925.00
05/02	Eagle Protective Direct Dep PPD ID: 9111111101	2,641.38
05/06	Quickpay With Zelle Payment From Guy G Cannon 8205273519	225.00
05/16	Eagle Protective Direct Dep PPD ID: 9111111101	2,641.38
05/20	ATM Cash Deposit 05/19 161 W Spring Creek Pkwy Plano TX Card 3110	2,500.00
05/20	Remote Online Deposit 1	3,212.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	600.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	600.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	600.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	600.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	600.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	580.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	520.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	460.00
05/21	ATM Cash Deposit 05/21 161 W Spring Creek Pkwy Plano TX Card 3110	380.00
05/21	Interest Payment	0.02
<b>Total Deposits and Additions</b>		<b>\$21,517.03</b>



April 20, 2019 through May 21, 2019  
Primary Account [REDACTED] 1773

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
913 ^		05/13	\$500.00
1030 * ^		05/21	26.48
1084 * ^		04/23	25.00
1754 * ^		04/29	370.00
1773 * ^		05/08	65.00
1774 ^		04/24	1,150.00
1775 ^		04/25	2,471.67
1778 * ^		05/20	65.00

**Total Checks Paid \$4,673.15**

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
04/22	Card Purchase 04/20 Sayyad Mediterranean Ki Richardson TX Card 3110	\$26.63
04/29	Card Purchase 04/28 Sq *Elegance By Monika Plano TX Card 3110	43.30
04/29	Card Purchase With Pin 04/28 Wal Wal-Mart Super 552 Lucas TX Card 3110	117.79
04/29	Card Purchase 04/29 Wal-Mart #5672 Lucas TX Card 3110	17.28
05/03	Card Purchase With Pin 05/03 Racetrac 93 Allen TX Card 3110	20.79
05/06	Card Purchase With Pin 05/04 Wal Wal-Mart Super 241 Lucas TX Card 3110	233.17
05/13	Card Purchase 05/12 Kebab N Kurry, Inc Plano TX Card 3110	237.61
05/17	Card Purchase With Pin 05/17 Bananarepublic US 8559 Frisco TX Card 3110	106.09
05/20	Card Purchase 05/17 Nordstrom #0724 Frisco TX Card 3110	355.06
05/20	Card Purchase 05/17 Nordstrom #0724 Frisco TX Card 3110	95.26
05/20	Card Purchase 05/17 Panda Express #1951 Frisco TX Card 3110	18.84
05/20	Card Purchase 05/17 Auntie Anne's TX174 Frisco TX Card 3110	6.36
05/20	Card Purchase 05/19 Taco Bell 035444 Dallas TX Card 3110	11.98

**Total ATM & Debit Card Withdrawals \$1,290.16**

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
04/22	Quickpay With Zelle Payment To Guy Cannon 8157227765	\$300.00
04/24	Grayson-Collin Elec Paymt PPD ID: 1750300645	122.21
04/29	Quickpay With Zelle Payment To Tovar Frankarlos 8175356839	1.00
04/29	Quickpay With Zelle Payment To Tovar Frankarlos 8175360053	500.00
04/29	Discover E-Payment 5319 Web ID: 2510020270	134.07
05/03	U.S. Bank N.A. Payment 000000515313653 Tel ID: 5551540853	588.25
05/03	Nfm Payment PPD ID: 1490000027	199.00
05/09	Atmos Energy Rcr UTIL Pymt PPD ID: 9000000091	44.14
05/10	Coserv Od Cw Aw Bill Pay 11849479441 Web ID: 7529027011	78.00
05/13	Quickpay With Zelle Payment To Tovar Frankarlos 8220515871	100.00
05/13	Citi Autopay Payment 082958354771892 Tel ID: Citicardap	198.03



April 20, 2019 through May 21, 2019  
Primary Account: [REDACTED] 1773

## ELECTRONIC WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
05/13	Chase Credit Crd Autopay PPD ID: 4760039224	169.00
05/16	Simmons Bank - L Tel Pmts Tr88 Tel ID: 1710162300	2,418.74
05/16	American Express ACH Pmt PPD ID: 9493560001	500.00
05/16	City of Parker Parker PPD ID: 751382954	139.31
05/16	Nafmd Phonecheck Tel ID: 3383693141	39.95
05/20	Neiman Marcus Online Pmt 000001907736345 Web ID: 9541719427	100.00
05/20	Nordstrom Payment 043000096069368 Web ID: 9044022131	38.00
05/21	Affiliated Bank 1 Time Dft 0073249344 Web ID: 9Dft4	4,046.07
<b>Total Electronic Withdrawals</b>		<b>\$9,715.77</b>

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
04/23	04/23 Withdrawal	\$300.00
05/20	05/20 Withdrawal	4,500.00
<b>Total Other Withdrawals</b>		<b>\$4,800.00</b>

## FEES

DATE	DESCRIPTION	AMOUNT
05/21	Monthly Service Fee	\$25.00
<b>Total Fees</b>		<b>\$25.00</b>

### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Premier Plus Checking account. Here are the two ways you can avoid this fee during any statement period.

- **Have an average qualifying deposit and investment balance of at least \$15,000.00 during your statement period.**  
(Your average qualifying deposit and investment balance was \$2,337.00)

*Talk to a banker about transferring your balances to Chase today!*

- **OR, authorize us to make automatic payments to your qualifying Chase mortgage from your Chase account.**  
(You do not have a qualifying Chase mortgage)

*Talk to a banker about a Chase mortgage!*

**Stop in today and explore all Chase has to offer.**

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$0.00	\$34.00
Total Returned Item Fees	\$0.00	\$0.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees



April 20, 2019 through May 21, 2019  
Primary Account: [REDACTED] 1773

## CHASE PLUS SAVINGS

MUHAMMAD N SIDDIQI

Account Number: [REDACTED] 5037

### SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$32.60
Ending Balance	\$32.60
Annual Percentage Yield Earned This Period	0.00%
Interest Paid Year-to-Date	\$0.04

The monthly service fee for this account was waived as an added feature of Chase Premier Plus Checking account.

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Plus Checking account.

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt. For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



April 20, 2019 through May 21, 2019  
Primary Account: [REDACTED] 1773

## Overdraft and Overdraft Fee Information for Your Chase Checking Account

### What You Need to Know About Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection through a link to a Chase savings account, which may be less expensive than our standard overdraft practices. You can contact us to learn more.

This notice explains our standard overdraft practices.

- **What are the standard overdraft practices that come with my account?**

We **do** authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Recurring debit card transactions

We **do not** authorize and pay overdrafts for the following types of transactions, unless you ask us to (see below):

- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction. If we do not authorize and pay an overdraft, your transaction will be declined.

- **What fees will I be charged if Chase pays my overdraft?**

Under our standard overdraft practices:

- If we pay an item, we'll charge you a \$34 Insufficient Funds Fee per item. This fee is not charged if your account balance at the end of the business day is overdrawn by \$5 or less, or for items that are \$5 or less.
- We won't charge more than three Insufficient Funds Fees per day, for a total of \$102.

- **We waive fees for some account types:**

- For Chase Sapphire<sup>SM</sup> Checking accounts, we waive the Insufficient Funds and Returned Item fees if you've had four or fewer Insufficient Funds or Returned Item occurrences in the past 12 months.
- For Chase Private Client Checking<sup>SM</sup> accounts, we waive the Chase overdraft fees.

- **What if I want Chase to authorize and pay overdrafts on my everyday debit card transactions?**

If you or a joint account owner would like to change your selection, sign in to [chase.com](https://chase.com) to update your account settings, or call us anytime at 1-800-935-9935 (or collect at 1-713-262-1679 if outside the U.S.), or visit a Chase branch.


April 2019


Activity From 04/01/19-04/30/19


Page 1 of 3

Member Number: XXXXXXXX2000

P.O. Box 853912  
Richardson, TX 75085-3912

 **Phone** 972.348.2000  
**Toll-Free** 800.843.5295  
**Auto-Access** 972.348.2001  
800.843.6426

 **Online** [www.TexansCU.org](http://www.TexansCU.org)

 **Mail** P.O. Box 853912  
Richardson, TX 75085-3912

MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$338.14
Consumer Shares (Savings)	XXXXXX2750	\$1,574.68
Certificate of Deposit(s)	1 Account(s)	\$1,242.70
<b>Total Current Value</b>		<b>\$3,155.52</b>

## IMPORTANT INFORMATION ON YOUR TEXANS ACCOUNTS:

**Change of address, phone number, email address:** You may log into online banking, call us at the phone number on the front of this statement or visit your local branch to update your information.

**Membership account agreement:** Current copies of the membership account agreement and deposit account disclosure (fee schedule) may be obtained on our website at [www.texanscu.org](http://www.texanscu.org) or at your local branch.

**Electronic transfers: In case of errors or questions about your electronic transfers:** If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, call or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

*For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it will take to complete our investigation.*

**Loans: In case of errors or questions about line-of-credit loans:** If you think your statement is wrong or you need more information about your loan, write us at the address listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared. You can call us, but doing so will not preserve your rights.

*You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount in question.*

For either type of error or question:

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

**Direct deposits:** To confirm pre-authorized credits (direct deposits, e.g.) were deposited as scheduled, you may call us at the phone number on the front of this statement, review your online banking activity or visit your local branch.

**Reporting other problems:** You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree to not make a claim against us for the problems or unauthorized transactions.

**We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.**

You have the right to dispute the accuracy of information that Texans Credit Union has furnished to a consumer reporting agency by writing to us at the address on the front of your statement. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

Texans Credit Union is federally insured by the National Credit Union Association.

✓ **Balance your checking account:** Visit [www.texanscu.org/balance](http://www.texanscu.org/balance) for a printable version of the How to Balance Your Account Worksheet.



My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
338.14	0.00	0.00	0.00	0.00	<b>338.14</b>

Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
04/01	Starting Balance			<b>338.14</b>
No Activity This Period				

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
3,483.70	0.00	0.07	1,909.09	0.00	<b>1,574.68</b>

Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
04/01	Starting Balance			<b>3,483.70</b>
04/04	External Withdrawal CADENCE BANK - ACH	-1,909.09		1,574.61
04/30	Credit Dividends		0.07	1,574.68

The Annual Percentage Yield Earned for this account is 0.05%  
 Dividends Paid in 2019 for this account is 0.22

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,242.39	0.00	0.31	0.00	0.00	<b>1,242.70</b>

Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
04/01	Starting Balance			<b>1,242.39</b>
04/30	Credit Dividends		0.31	1,242.70

The Annual Percentage Yield Earned for this account is 0.30%  
 Interest Paid in 2019 for this account is 1.24  
 The Certificate Maturity date for this account is 05/18/19

May 2019

Activity From 05/01/19-05/31/19

Page 1 of 3

Member Number: XXXXXXXX2000

P.O. Box 853912  
Richardson, TX 75085-3912

Phone 972.348.2000  
Toll-Free 800.843.5295  
Auto-Access 972.348.2001  
800.843.6426

Online www.TexansCU.org

Mail P.O. Box 853912  
Richardson, TX 75085-3912

MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$332.14
Consumer Shares (Savings)	XXXXXX2750	\$1,665.67
Certificate of Deposit(s)	1 Account(s)	\$1,243.59
<b>Total Current Value</b>		<b>\$3,241.40</b>

### Important Information

#### We've Updated Your Consumer Membership Account Agreement (Agreement) – Effective immediately

Your Agreement has been updated to clarify the following General Terms and Conditions: 7. Transactions from our Account(s). a) Payment Order of Your Transactions, 15. Courtesy Pay, Overdraft, and Overdraft Protection Plan, and 27. Telephone Requests; Recording Communications and Consent to Communications from the Credit Union. Our funds availability policy Special Rules for New Accounts section has been updated. Your continued use of your account(s) is your acceptance of the revisions. You can obtain a copy of the revised Agreement by visiting our website at [www.TexansCU.org/disclosures](http://www.TexansCU.org/disclosures), at any branch location or by calling us at 972.348.2000.

## IMPORTANT INFORMATION ON YOUR TEXANS ACCOUNTS:

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My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
338.14	0.00	0.00	0.00	6.00	<b>332.14</b>

Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
05/01	Starting Balance			<b>338.14</b>
05/31	Inactivity Fee	-6.00		332.14

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,574.68	2,000.00	0.08	1,909.09	0.00	<b>1,665.67</b>

Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
05/01	Starting Balance			<b>1,574.68</b>
05/02	Deposit		2,000.00	3,574.68
05/06	External Withdrawal CADENCE BANK - ACH	-1,909.09		1,665.59
05/31	Credit Dividends		0.08	1,665.67

The Annual Percentage Yield Earned for this account is 0.05%

Dividends Paid in 2019 for this account is 0.30

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,242.70	0.00	0.89	0.00	0.00	<b>1,243.59</b>

Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
05/01	Starting Balance			<b>1,242.70</b>
05/17	Credit Dividends		0.17	1,242.87
05/31	Credit Dividends		0.72	1,243.59

The Annual Percentage Yield Earned for this account is 0.85%

Interest Paid in 2019 for this account is 2.13

The Certificate Maturity date for this account is 05/18/21


June 2019


Activity From 06/01/19-06/30/19


Page 1 of 3

Member Number: XXXXXXXX2000

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Richardson, TX 75085-3912

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MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$326.14
Consumer Shares (Savings)	XXXXXX2750	\$1,824.69
Certificate of Deposit(s)	1 Account(s)	\$1,245.12
<b>Total Current Value</b>		<b>\$3,395.95</b>

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My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
332.14	0.00	0.00	0.00	6.00	<b>326.14</b>

#### Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
06/01	Starting Balance			<b>332.14</b>
06/30	Inactivity Fee	-6.00		326.14

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,665.67	2,068.00	0.11	1,909.09	0.00	<b>1,824.69</b>

#### Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
06/01	Starting Balance			<b>1,665.67</b>
06/02	Deposit Shared Branch Mobile Richardson TX		640.00	2,305.67
06/02	Deposit Shared Branch Mobile Richardson TX		1,428.00	3,733.67
06/04	External Withdrawal CADENCE BANK - ACH	-1,909.09		1,824.58
06/04	External Withdrawal CADENCE BANK - ACH (Returned)		1,909.09	3,733.67
06/17	External Withdrawal CADENCE BANK - ACH	-1,909.09		1,824.58
06/30	Credit Dividends		0.11	1,824.69

The Annual Percentage Yield Earned for this account is 0.05%

Dividends Paid in 2019 for this account is 0.41

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,243.59	0.00	1.53	0.00	0.00	<b>1,245.12</b>

#### Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
06/01	Starting Balance			<b>1,243.59</b>
06/30	Credit Dividends		1.53	1,245.12

The Annual Percentage Yield Earned for this account is 1.51%

Interest Paid in 2019 for this account is 3.66

The Certificate Maturity date for this account is 05/18/21


July 2019


Activity From 07/01/19-07/31/19


Page 1 of 3

Member Number: XXXXXXXX2000

P.O. Box 853912  
Richardson, TX 75085-3912

 **Phone** 972.348.2000  
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Richardson, TX 75085-3912

MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$320.14
Consumer Shares (Savings)	XXXXXX2750	\$1,824.77
Certificate of Deposit(s)	1 Account(s)	\$1,246.71
<b>Total Current Value</b>		<b>\$3,391.62</b>



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My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
326.14	0.00	0.00	0.00	6.00	<b>320.14</b>

Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
07/01	Starting Balance			<b>326.14</b>
07/31	Inactivity Fee	-6.00		320.14

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,824.69	0.00	0.08	0.00	0.00	<b>1,824.77</b>

Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
07/01	Starting Balance			<b>1,824.69</b>
07/05	External Withdrawal CADENCE BANK - ACH	-1,909.09		-84.40
07/05	External Withdrawal CADENCE BANK - ACH (Returned)		1,909.09	1,824.69
07/31	Credit Dividends		0.08	1,824.77

The Annual Percentage Yield Earned for this account is 0.05%  
Dividends Paid in 2019 for this account is 0.49

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,245.12	0.00	1.59	0.00	0.00	<b>1,246.71</b>

Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
07/01	Starting Balance			<b>1,245.12</b>
07/31	Credit Dividends		1.59	1,246.71


The Annual Percentage Yield Earned for this account is 1.51%  
Interest Paid in 2019 for this account is 5.25  
The Certificate Maturity date for this account is 05/18/21


Activity From 08/01/19-08/31/19


Page 1 of 3

Member Number: XXXXXX2000

P.O. Box 853912  
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MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$314.14
Consumer Shares (Savings)	XXXXXX2750	\$3,572.85
Certificate of Deposit(s)	1 Account(s)	\$1,248.30
<b>Total Current Value</b>		<b>\$5,135.29</b>

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My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
320.14	0.00	0.00	0.00	6.00	<b>314.14</b>

Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
08/01	Starting Balance			<b>320.14</b>
08/31	Inactivity Fee	-6.00		314.14

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,824.77	1,748.00	0.08	0.00	0.00	<b>3,572.85</b>

Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
08/01	Starting Balance			<b>1,824.77</b>
08/30	Deposit Shared Branch Mobile Richardson TX		1,748.00	3,572.77
08/31	Credit Dividends		0.08	3,572.85

The Annual Percentage Yield Earned for this account is 0.05%  
 Dividends Paid in 2019 for this account is 0.57

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,246.71	0.00	1.59	0.00	0.00	<b>1,248.30</b>

Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
08/01	Starting Balance			<b>1,246.71</b>
08/31	Credit Dividends		1.59	1,248.30

The Annual Percentage Yield Earned for this account is 1.51%  
 Interest Paid in 2019 for this account is 6.84  
 The Certificate Maturity date for this account is 05/18/21


September 2019


Activity From 09/01/19-09/30/19


Page 1 of 3

Member Number: XXXXXXXX2000

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MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150 - 2412

### Statement Summary

ACCOUNT TYPE	NUMBER	BALANCE
My Texans Checking	XXXXXX8631	\$824.88
Consumer Shares (Savings)	XXXXXX2750	\$154.69
Certificate of Deposit(s)	1 Account(s)	\$0.00
<b>Total Current Value</b>		<b>\$979.57</b>

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**Electronic transfers: In case of errors or questions about your electronic transfers:** If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, call or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

*For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it will take to complete our investigation.*

**Loans: In case of errors or questions about line-of-credit loans:** If you think your statement is wrong or you need more information about your loan, write us at the address listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared. You can call us, but doing so will not preserve your rights.

*You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount in question.*

For either type of error or question:

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

**Direct deposits:** To confirm pre-authorized credits (direct deposits, e.g.) were deposited as scheduled, you may call us at the phone number on the front of this statement, review your online banking activity or visit your local branch.

**Reporting other problems:** You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree to not make a claim against us for the problems or unauthorized transactions.

**We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.**

You have the right to dispute the accuracy of information that Texans Credit Union has furnished to a consumer reporting agency by writing to us at the address on the front of your statement. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

Texans Credit Union is federally insured by the National Credit Union Association.

✓ **Balance your checking account:** Visit [www.texasncu.org/balance](http://www.texasncu.org/balance) for a printable version of the How to Balance Your Account Worksheet.

My Texans Checking					XXXXXX8631
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
314.14	4,356.81	0.00	3,846.07	0.00	<b>824.88</b>

Transactions for My Texans Checking

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
09/01	Starting Balance			<b>314.14</b>
09/24	Deposit		2,641.38	2,955.52
09/24	Deposit		1,215.43	4,170.95
09/24	Deposit		500.00	4,670.95
09/24	Withdrawal	-3,846.07		824.88

Consumer Shares (Savings)					XXXXXX2750
BEGINNING BALANCE	DEPOSITS	DIVIDENDS EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
3,572.85	0.00	0.02	3,418.18	0.00	<b>154.69</b>

Transactions for Consumer Shares (Savings)

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
09/01	Starting Balance			<b>3,572.85</b>
09/04	External Withdrawal CADENCE BANK - ACH	-3,418.18		154.67
09/30	Credit Dividends		0.02	154.69

The Annual Percentage Yield Earned for this account is 0.05%

Dividends Paid in 2019 for this account is 0.59

24 Month Certificate					XX5350
BEGINNING BALANCE	DEPOSITS	INTEREST EARNED	WITHDRAWALS	SERVICE FEES	ENDING BALANCE
1,248.30	0.00	1.18	1,224.48	25.00	<b>0.00</b>

Transactions for 24 Month Certificate

DATE	DESCRIPTION OF TRANSACTION	DEBITS	CREDITS	BALANCE
09/01	Starting Balance			<b>1,248.30</b>
09/24	CD Early Withdrawal Fee	-25.00		1,223.30
09/24	Closeout Withdrawal	-1,215.43		7.87
09/24	Credit Dividends		1.18	9.05
09/24	Penalty	-9.05		-0.00

The Annual Percentage Yield Earned for this account is 1.51%

Interest Paid in 2019 for this account is 8.02

The Certificate Maturity date for this account is 05/18/21





JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

October 22, 2019 through November 21, 2019

Primary Account: [REDACTED] 4685

00006725 DRE 201 210 32619 NNNNNNNNNN 1 000000000 34 0000

FATIMA ALI  
1901 EASTFORK LN  
WYLIE TX 75098-7754

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679



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**We want to remind you about the overdraft service options that are available for your personal checking account(s)**

We've included information on the last page of this statement to remind you of our overdraft services and associated fees. You can find more information about these services and ways to avoid overdraft fees at [chase.com/overdraft-services](https://chase.com/overdraft-services).

If you have questions, please call us at the number on your statement.

#### CONSOLIDATED BALANCE SUMMARY

##### ASSETS

Checking & Savings	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Total Checking	[REDACTED] 4685	\$91.53	\$35.66
Chase Savings	[REDACTED] 4172	25.17	30.17
<b>Total</b>		<b>\$116.70</b>	<b>\$65.83</b>
<b>TOTAL ASSETS</b>		<b>\$116.70</b>	<b>\$65.83</b>

#### CHASE TOTAL CHECKING

FATIMA ALI

Account Number: [REDACTED] 4685

#### CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$91.53</b>
Deposits and Additions	4,730.67
ATM & Debit Card Withdrawals	-909.91
Electronic Withdrawals	-3,864.63
Fees	-12.00
<b>Ending Balance</b>	<b>\$35.66</b>



October 22, 2019 through November 21, 2019  
Primary Account [REDACTED] 54685

Your account ending in 4172 is linked to this account for overdraft protection.

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	<b>Beginning Balance</b>		<b>\$91.53</b>
10/22	Card Purchase 10/20 Aldi 75046 Wylie TX Card 4822	-7.47	84.06
10/24	Recurring Card Purchase 10/24 Molina Healthcare Inc 888-560-2025 TX Card 4822	-39.73	44.33
10/25	ATM Cash Deposit 10/25 1204 Angel Pkwy Allen TX Card 4822	<b>500.00</b>	544.33
10/25	Quickpay With Zelle Payment To Naazi Khana Jpm284859212	-15.00	529.33
10/28	Paypal Transfer PPD ID: Paypalsd11	<b>30.67</b>	560.00
10/28	Card Purchase 10/26 Kroger 0578 Wylie TX Card 4822	-35.06	524.94
10/28	Wan Xing Ke Ji J lat Paypal 1006983210793 Web ID: 770510487C	-37.83	487.11
10/28	Paypal Inst Xfer Adobe Inc Web ID: Paypalsi77	-10.81	476.30
10/29	Card Purchase 10/28 Grayson-Collin Elect Graysoncollin TX Card 4822	-365.52	110.78
10/29	Paypal Inst Xfer 2Checkoutco Web ID: Paypalsi77	-64.25	46.53
11/01	ATM Cash Deposit 11/01 190 E Stacy Rd Allen TX Card 4822	<b>700.00</b>	746.53
11/01	Iqa Foundation D ACH Debit 5230375964 Web ID: 9200502236	-515.00	231.53
11/04	Card Purchase 11/01 Target 00025163 Allen TX Card 4822	-2.88	228.65
11/04	Card Purchase 11/01 Chick-Fil-A #02354 Allen TX Card 4822	-5.52	223.13
11/04	Card Purchase 11/02 Apple.Com/Bill 866-712-7753 CA Card 4822	-3.24	219.89
11/04	Card Purchase 11/02 Chick-Fil-A #02354 Allen TX Card 4822	-9.09	210.80
11/04	Card Purchase 11/03 Amzn Mktp US*Kc2Rc8W Amzn.Com/Bill WA Card 4822	-32.46	178.34
11/04	Card Purchase 11/03 Taco Bell # '032187 Allen TX Card 4822	-5.61	172.73
11/04	Card Purchase With Pin 11/03 Old Navy US 3389 Garland TX Card 4822	-27.70	145.03
11/04	Card Purchase 11/03 Kroger 0578 Wylie TX Card 4822	-8.77	136.26
11/04	Card Purchase 11/03 Taco Bell # '032187 Allen TX Card 4822	-3.67	132.59
11/04	Recurring Card Purchase 11/01 Cts*Frontier Onlinepa 800-921-8101 CT Card 4822	-67.91	64.68
11/05	Deposit 1905681932	<b>3,000.00</b>	3,064.68
11/05	Card Purchase 11/04 Wendy's #11493 Lucas TX Card 4822	-5.49	3,059.19
11/05	11/05 Online Payment 8829394433 To Mr Cooper New Mortgage 2019	-1,800.00	1,259.19
11/05	Capital One Online Pmt 930939910430677 Web ID: 9279744991	-200.00	1,059.19
11/05	Best Buy Auto Pynt 723085241260063 Web ID: Citiautfr	-28.00	1,031.19
11/06	Card Purchase 11/05 Tjmaxx #0258 Plano TX Card 4822	-87.38	943.81
11/06	Card Purchase 11/05 Target 00025163 Allen TX Card 4822	-59.47	884.34
11/06	Card Purchase 11/05 Wendy's #11493 Lucas TX Card 4822	-9.50	874.84
11/07	11/07 Online Payment 8731520719 To Best Buy	-50.00	824.84
11/12	Chase Credit Crd Autopay PPD ID: 4760039224	-100.00	724.84
11/12	Recurring Card Purchase 11/09 Fsi*Coserv 800-274-4014 TX Card 4822	-43.00	681.84
11/14	Card Purchase 11/13 Amzn Mktp US*Km2285E Amzn.Com/Bill WA Card 4822	-23.95	657.89
11/14	Best Buy Payment 203118873565734 Tel ID: Citigpufdr	-261.00	396.89
11/15	11/15 Transfer To Sav Xxxxx4172	-5.00	391.89
11/15	Capital One Crcardpmt 931830180185622 Web ID: 9541719018	-50.00	341.89
11/18	ATM Cash Deposit 11/18 161 W Spring Creek Pkwy Plano TX Card 4822	<b>500.00</b>	841.89
11/18	Quickpay With Zelle Payment To Cleaning 8873376112	-220.00	621.89
11/18	City of Parker Parker PPD ID: 751382954	-507.74	114.15



October 22, 2019 through November 21, 2019

Primary Account: [REDACTED] 4685

## TRANSACTION DETAIL (continued)

DATE	DESCRIPTION	AMOUNT	BALANCE
11/19	Card Purchase With Pin 11/19 Wm Superc Wal-Mart Sup Lucas TX Card 4822	-65.41	48.74
11/19	Card Purchase With Pin 11/19 Wal-Mart #5672 Lucas TX Card 4822	-1.08	47.66
11/21	Monthly Service Fee	-12.00	35.66
Ending Balance			<b>\$35.66</b>

### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Total Checking account. Here are the three ways you can avoid this fee during any statement period.

- **Have direct deposits totaling \$500.00 or more.**  
(Your total direct deposits this period were \$30.67. Note: some deposits may be listed on your previous statement)
- **OR, keep a minimum daily balance in this checking account of \$1,500.00 or more.**  
(Your minimum daily balance was \$44.33)
- **OR, keep an average daily balance of qualifying linked deposits and investments of \$5,000.00 or more.**  
(Your average daily balance of qualifying linked deposits and investments was \$422.68)

*Talk to a banker about transferring your balances to Chase today!*

**Stop in today and explore all Chase has to offer.**

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$ .00	\$34.00
Total Returned Item Fees	\$ .00	\$ .00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

## CHASE SAVINGS

FATIMA ALI

Account Number: [REDACTED] 4172

## SAVINGS SUMMARY

	AMOUNT
Beginning Balance	<b>\$25.17</b>
Deposits and Additions	5.00
Ending Balance	<b>\$30.17</b>
Annual Percentage Yield Earned This Period	0.00%



October 22, 2019 through November 21, 2019

Primary Account: [REDACTED] 1685

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	<b>Beginning Balance</b>		<b>\$25.17</b>
11/15	Transfer From Chk Xxxxx4685	5.00	30.17
	<b>Ending Balance</b>		<b>\$30.17</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt. For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



October 22, 2019 through November 21, 2019  
Primary Account [REDACTED] 685

## Overdraft and Overdraft Fee Information for Your Chase Checking Account

### What You Need to Know About Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection through a link to a Chase savings account, which may be less expensive than our standard overdraft practices. You can contact us to learn more.

This notice explains our standard overdraft practices.

- **What are the standard overdraft practices that come with my account?**

We **do** authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Recurring debit card transactions

We **do not** authorize and pay overdrafts for the following types of transactions, unless you ask us to (see below):

- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction. If we do not authorize and pay an overdraft, your transaction will be declined.

- **What fees will I be charged if Chase pays my overdraft?**

Under our standard overdraft practices:

- If we pay an item, we'll charge you a \$34 Insufficient Funds Fee per item. This fee is not charged if your account balance at the end of the business day is overdrawn by \$5 or less, or for items that are \$5 or less.
- We won't charge more than three Insufficient Funds Fees per day, for a total of \$102.

- **We waive fees for some account types:**

- For Chase Sapphire<sup>SM</sup> Checking accounts, we waive the Insufficient Funds and Returned Item fees if items(s) are presented or withdrawal request(s) are made against an account with insufficient funds on four or fewer business days in the past 12 months.
- For Chase Private Client Checking<sup>SM</sup> accounts, we waive the Chase overdraft fees.

- **What if I want Chase to authorize and pay overdrafts on my everyday debit card transactions?**

If you or a joint account owner would like to change your selection, sign in to chase.com to update your account settings, or call us at 1-800-935-9935 (or collect at 1-713-262-1679 if outside the U.S.), or visit a Chase branch. We accept operator relay calls.





October 22, 2019 through November 21, 2019

Primary Account: [REDACTED] 4685

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

September 21, 2019 through October 21, 2019  
Primary Account [REDACTED] 4685

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679

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FATIMA ALI  
1901 EASTFORK LN  
WYLIE TX 75098-7754



00067220301000000023

### Good news! We're making it easier to get a replacement account number if your account is compromised.

Starting November 17, 2019, if your account is compromised, we can simply issue you a replacement account number without the hassle of closing your existing account and opening a new one. This will allow you to continue using your existing debit card.

We've updated our Deposit Account Agreement to explain this change:

*We can assign and transfer your account information and documentation to a replacement account number at our discretion. We may make this assignment when your account is reported compromised by you or any signer. If we issue you a replacement account number, this Deposit Account Agreement governing you and your account will continue to apply, without interruption, as if you retained the discontinued account number.*

Please call us at the number at the top of this statement if you have any questions.

### CONSOLIDATED BALANCE SUMMARY

#### ASSETS

Checking & Savings	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Total Checking	[REDACTED] 4685	\$1,087.89	\$91.53
Chase Savings	[REDACTED] 4172	20.17	25.17
<b>Total</b>		<b>\$1,108.06</b>	<b>\$116.70</b>
<b>TOTAL ASSETS</b>		<b>\$1,108.06</b>	<b>\$116.70</b>



September 21, 2019 through October 21, 2019

Primary Account: [REDACTED] 4685

## CHASE TOTAL CHECKING

FATIMA ALI

Account Number: [REDACTED] 685

## CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$1,087.89</b>
Deposits and Additions	5,396.66
Checks Paid	-1,065.49
ATM & Debit Card Withdrawals	-1,643.43
Electronic Withdrawals	-3,672.10
Fees	-12.00
<b>Ending Balance</b>	<b>\$91.53</b>

Your account ending in 4172 is linked to this account for overdraft protection.

## CHECKS PAID

CHECK NUMBER	DATE PAID	AMOUNT
256 ^	09/24	\$265.49
296 * ^	10/18	400.00
346 * ^	09/23	400.00
<b>Total Checks Paid</b>		<b>\$1,065.49</b>

If you see a check description in the Transaction Detail section, it means your check has already been converted for electronic payment. Because of this, we're not able to return the check to you or show you an image on Chase.com.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	<b>Beginning Balance</b>		<b>\$1,087.89</b>
09/23	Card Purchase 09/20 Nordstrom #0724 Frisco TX Card 4822	-4.32	1,083.57
09/23	Card Purchase 09/20 Nordstrom #0724 Frisco TX Card 4822	-1.08	1,082.49
09/23	Card Purchase 09/20 Subway 00346163 Frisco TX Card 4822	-7.57	1,074.92
09/23	Check # 346	-400.00	674.92
09/23	Recurring Card Purchase 09/22 Netflix.Com Netflix.Com CA Card 4822	-14.06	660.86
09/23	Paypal Inst Xfer 360Training Web ID: Paypalsi77	-7.00	653.86
09/24	Check # 256	-265.49	388.37
09/24	Recurring Card Purchase 09/24 Molina Healthcare Inc 888-560-2025 TX Card 4822	-39.73	348.64
09/24	Paypal Inst Xfer Ultasalonco Web ID: Paypalsi77	-38.97	309.67
09/25	Card Purchase 09/24 Murphy Express 8722 Allen TX Card 4822	-3.23	306.44
09/25	Card Purchase 09/24 Murphy Express 8722 Allen TX Card 4822	-60.72	245.72
09/25	Quickpay With Zelle Payment To Sani 8681479518	-100.00	145.72

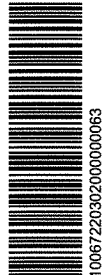




September 21, 2019 through October 21, 2019  
Primary Account [REDACTED] 4685

**TRANSACTION DETAIL** (continued)

DATE	DESCRIPTION	AMOUNT	BALANCE
09/26	Card Purchase With Pin 09/26 Wm Superc Wal-Mart Sup Lucas TX Card 4822	-8.58	137.14
09/27	Card Purchase 09/26 Whataburger 975 Murphy TX Card 4822	-2.91	134.23
09/27	Card Purchase 09/26 Wendy's #11493 Lucas TX Card 4822	-8.41	125.82
09/27	Paypal Inst Xfer Ultasalonco Web ID: Paypalsi77	-27.06	98.76
09/30	ATM Cash Deposit 09/30 819 S Allen Heights DR Allen TX Card 4822	3,000.00	3,098.76
09/30	Card Purchase 09/29 Amzn Mktp US*B49T357 Amzn.Com/Bill WA Card 4822	-13.95	3,084.81
09/30	Card Purchase 09/29 Wendy's #11493 Lucas TX Card 4822	-9.06	3,075.75
10/02	Card Purchase 09/30 Kroger 0578 Wylie TX Card 4822	-65.61	3,010.14
10/02	Card Purchase 10/01 Apl*Itunes.Com/Bill 866-712-7753 CA Card 4822	-5.39	3,004.75
10/02	Card Purchase 10/01 Panera Bread #601404 Allen TX Card 4822	-14.08	2,990.67
10/02	Iqa Foundation D ACH Debit 5227429311 Web ID: 9200502236	-515.00	2,475.67
10/03	10/02 Online Payment 8709609765 To Kohls	-30.00	2,445.67
10/03	10/02 Online Payment 8709610328 To Mr Cooper New Mortgage 2019	-1,900.00	545.67
10/03	Card Purchase 10/03 Amzn Mktp US*N53Ux4U Amzn.Com/Bill WA Card 4822	-9.21	536.46
10/03	Card Purchase 10/03 Audible US*Un7Fp1Jy3 888-283-5051 NJ Card 4822	-16.18	520.28
10/03	Card Purchase With Pin 10/03 Wm Superc Wal-Mart Sup Lucas TX Card 4822	-48.94	471.34
10/03	Card Purchase With Pin 10/03 Racetrac 79 Murphy TX Card 4822	-52.60	418.74
10/04	Card Purchase 10/03 Party City 219 Plano TX Card 4822	-20.37	398.37
10/04	Card Purchase 10/03 Cts*Frontier Onlinepa 800-921-8101 CT Card 4822	-78.62	319.75
10/04	Card Purchase 10/03 Sonrisa Dental Clinic Irving TX Card 4822	-60.00	259.75
10/07	Card Purchase 10/06 Wendy's #11493 Lucas TX Card 4822	-30.13	229.62
10/07	Card Purchase 10/06 Qt 926 08009268 Allen TX Card 4822	-11.73	217.89
10/07	Best Buy Auto Pymt 723059320570124 Web ID: Citiautfr	-28.00	189.89
10/08	Card Purchase Return 10/07 Journeys 080270 Allen TX Card 4822	97.41	287.30
10/08	Remote Online Deposit 1	850.00	1,137.30
10/08	Card Purchase 10/07 India Bazaar Plano Plano TX Card 4822	-28.02	1,109.28
10/08	Card Purchase 10/07 Journeys 080270 Allen TX Card 4822	-16.24	1,093.04
10/08	Card Purchase 10/07 Coca Cola Buckner Dallas TX Card 4822	-1.75	1,091.29
10/09	Card Purchase 10/07 Chick-Fil-A #02354 Allen TX Card 4822	-21.55	1,069.74
10/09	Card Purchase 10/08 Target 00025502 Wylie TX Card 4822	-117.37	952.37
10/09	Card Purchase 10/08 Target 00025502 Wylie TX Card 4822	-13.51	938.86
10/09	10/09 Online Payment 8625846410 To Best Buy	-50.00	888.86
10/09	Card Purchase With Pin 10/09 Desi Bazaar Allen TX Card 4822	-19.59	869.27
10/10	Card Purchase 10/09 Spice Thai Cafe 214-383-3366 TX Card 4822	-25.28	843.99
10/11	Card Purchase 10/10 Wendy's #11493 Lucas TX Card 4822	-7.23	836.76
10/15	Card Purchase Return 10/14 Kroger Fuel Ctr 1578 Wylie TX Card 4822	1.00	837.76
10/15	Card Purchase 10/11 Grayson-Collin Elect Graysoncollin TX Card 4822	-408.04	429.72
10/15	Card Purchase 10/11 Fsi*Coserv 800-274-4014 TX Card 4822	-68.00	361.72
10/15	Card Purchase 10/11 Wholefds Fvw 10358 Fairview TX Card 4822	-24.99	336.73
10/15	Card Purchase 10/11 Sally Beauty #2922 Allen TX Card 4822	-16.40	320.33
10/15	Card Purchase 10/11 Wendy's #11493 Lucas TX Card 4822	-3.88	316.45
10/15	Card Purchase 10/12 Asia Salon Murphy TX Card 4822	-11.00	305.45





September 21, 2019 through October 21, 2019

Primary Account: [REDACTED] 4685

**TRANSACTION DETAIL** (continued)

DATE	DESCRIPTION	AMOUNT	BALANCE
10/15	Card Purchase 10/13 Amzn Mktp US*Sj0J44G Amzn.Com/Bill WA Card 4822	-18.36	287.09
10/15	Card Purchase 10/13 Apl* Itunes.Com/Bill 866-712-7753 CA Card 4822	-6.46	280.63
10/15	Card Purchase 10/13 Kroger 0578 Wylie TX Card 4822	-55.29	225.34
10/15	Card Purchase 10/13 Kroger Fuel Ctr 1578 Wylie TX Card 4822	-51.79	173.55
10/15	10/15 Transfer To Sav Xxxxx4172	-5.00	168.55
10/15	Chase Credit Crd Autopay PPD ID: 4760039224	-100.00	68.55
10/15	Capital One Crcardpmt 928730180342256 Web ID: 9541719018	-50.00	18.55
10/16	Deposit 1905631523	1,400.00	1,418.55
10/17	Card Purchase 10/16 Wendy's #11493 Lucas TX Card 4822	-5.06	1,413.49
10/18	10/17 Online Payment 8761879337 To Best Buy	-300.00	1,113.49
10/18	10/17 Online Payment 8761880709 To Capital One	-300.00	813.49
10/18	Check # 296	-400.00	413.49
10/18	T-Mobile Handset 7770980 Web ID: 0000450304	-150.67	262.82
10/21	Card Purchase Return 10/18 Target 00025502 Wylie TX Card 4822	48.25	311.07
10/21	Card Purchase 10/18 Target 00025502 Wylie TX Card 4822	-51.84	259.23
10/21	Card Purchase 10/18 Kroger 0578 Wylie TX Card 4822	-34.60	224.63
10/21	Card Purchase 10/19 Taco Bell # '032187 Allen TX Card 4822	-10.10	214.53
10/21	Card Purchase 10/21 Apl*Itunes.Com/Bill 866-712-7753 CA Card 4822	-5.39	209.14
10/21	Card Purchase 10/20 Dollar Tree Wylie TX Card 4822	-25.98	183.16
10/21	Card Purchase 10/20 Target 00025502 Wylie TX Card 4822	-2.05	181.11
10/21	Card Purchase 10/20 Target 00025502 Wylie TX Card 4822	-7.18	173.93
10/21	Maryam Yasin lat Paypal 1006900520701 Web ID: 770510487C	-35.40	138.53
10/21	Chase Credit Crd Autopay PPD ID: 4760039224	-35.00	103.53
10/21	Monthly Service Fee	-12.00	91.53
<b>Ending Balance</b>			<b>\$91.53</b>

**WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?**

A monthly Service Fee was charged to your Chase Total Checking account. Here are the three ways you can avoid this fee during any statement period.

- **Have direct deposits totaling \$500.00 or more.**  
(You did not have a direct deposit this statement period)  
*One of our bankers can help you set up direct deposit in just a few minutes.*
- **OR, keep a minimum daily balance in this checking account of \$1,500.00 or more.**  
(Your minimum daily balance was \$18.55)
- **OR, keep an average daily balance of qualifying linked deposits and investments of \$5,000.00 or more.**  
(Your average daily balance of qualifying linked deposits and investments was \$815.07)

*Talk to a banker about transferring your balances to Chase today!*

**Stop in today and explore all Chase has to offer.**



September 21, 2019 through October 21, 2019

Primary Account: [REDACTED] 685

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$ .00	\$34.00
Total Returned Item Fees	\$ .00	\$ .00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

## CHASE SAVINGS

FATIMA ALI

Account Number: [REDACTED] 4172

## SAVINGS SUMMARY

	AMOUNT
Beginning Balance	\$20.17
Deposits and Additions	5.00
Ending Balance	\$25.17
Annual Percentage Yield Earned This Period	0.00%

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		\$20.17
10/15	Transfer From Chk Xxxxx4685	5.00	25.17
	Ending Balance		\$25.17

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.  
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS:** Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



September 21, 2019 through October 21, 2019  
Primary Account: [REDACTED] 4685

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JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218-2051

August 21, 2019 through September 20, 2019

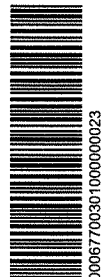
Primary Account: [REDACTED] 685

00006770 DRE 201 210 26419 NNNNNNNNNN 1 000000000 34 0000

FATIMA ALI  
1901 EASTFORK LN  
WYLIE TX 75098-7754

#### CUSTOMER SERVICE INFORMATION

Web site: Chase.com  
Service Center: 1-800-935-9935  
Deaf and Hard of Hearing: 1-800-242-7383  
Para Espanol: 1-877-312-4273  
International Calls: 1-713-262-1679



00067700301000000023

### Good news! We've made it easier to waive the \$5 Monthly Service Fee for your Chase Savings<sup>SM</sup> account

We now waive this fee when you make \$25 or more in total Autosave or other repeating automatic transfers from your personal Chase checking account or Chase Liquid<sup>®</sup> Card to your Chase Savings account during each monthly statement period.

You can set up Autosave in the Chase Mobile<sup>®</sup> app or on chase.com. To learn more about Autosave visit [chase.com/personal/checking/savings-program](https://chase.com/personal/checking/savings-program).

As a reminder, you won't be charged a Monthly Service Fee when you have one of the following in your Chase Savings account during each monthly statement period:

- A balance at the beginning of each day of \$300 or more in this account;
- OR, \$25 or more in total Autosave or other repeating automatic transfers from your personal Chase checking account or Chase Liquid Card;
- OR, a Chase College Checking<sup>SM</sup> account linked to this account for Overdraft Protection
- OR, an account owner who is an individual younger than 18;
- OR, a linked Chase Better Banking<sup>®</sup> Checking, Chase Premier Checking<sup>SM</sup>, Chase Premier Plus Checking<sup>SM</sup>, Chase Sapphire<sup>SM</sup> Checking, or Chase Private Client Checking<sup>SM</sup> account.

Please call us at the number on this statement if you have any questions.

### CONSOLIDATED BALANCE SUMMARY

#### ASSETS

Checking & Savings	ACCOUNT	BEGINNING BALANCE		ENDING BALANCE	
		THIS PERIOD		THIS PERIOD	
Chase Total Checking	[REDACTED] 4685	-\$1.35		\$1,087.89	
Chase Savings	[REDACTED] 4172	9.28		20.17	
<b>Total</b>		<b>\$7.93</b>		<b>\$1,108.06</b>	
<b>TOTAL ASSETS</b>		<b>\$7.93</b>		<b>\$1,108.06</b>	



August 21, 2019 through September 20, 2019  
Primary Account [REDACTED] 54685

## CHASE TOTAL CHECKING

FATIMA ALI

Account Number: [REDACTED] 4685

## CHECKING SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>-\$1.35</b>
Deposits and Additions	7,262.18
Checks Paid	-525.00
ATM & Debit Card Withdrawals	-789.09
Electronic Withdrawals	-4,812.85
Fees	-46.00
<b>Ending Balance</b>	<b>\$1,087.89</b>

Your account ending in 4172 is linked to this account for overdraft protection.

## CHECKS PAID

CHECK NUMBER	DATE PAID	AMOUNT
344 ^	08/30	\$515.00
345 ^	08/30	10.00
<b>Total Checks Paid</b>		<b>\$525.00</b>

If you see a check description in the Transaction Detail section, it means your check has already been converted for electronic payment. Because of this, we're not able to return the check to you or show you an image on Chase.com.

^ An image of this check may be available for you to view on Chase.com.

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	<b>Beginning Balance</b>		<b>-\$1.35</b>
08/21	ODP Transfer From Savings 000009286454172	1.35	0.00
08/26	Recurring Card Purchase 08/25 Molina Healthcare Inc 888-560-2025 TX Card 4822	-39.73	-39.73
08/26	Insufficient Funds Fee For A \$39.73 Recurring Card Purchase - Details: 0825Molina Healthcare Inc 888-560-2025 TX04347692029944822 01	-34.00	-73.73
08/27	ATM Cash Deposit 08/27 206 W Fm 544 Murphy TX Card 4822	450.00	376.27
08/28	Quickpay With Zelle Payment From Arlene Moonan Wfct06R3Fchw	500.00	876.27
08/29	Quickpay With Zelle Payment From Arlene Moonan Wfct06R7Bsbw	500.00	1,376.27
08/29	Card Purchase 08/27 Asia Salon Murphy TX Card 4822	-15.00	1,361.27
08/29	Card Purchase 08/27 Chick-Fil-A #02493 Murphy TX Card 4822	-11.90	1,349.37
08/29	T-Mobile Handset 0044229 Web ID: 0000450304	-155.31	1,194.06
08/30	Card Purchase 08/29 Target 00025502 Wylie TX Card 4822	-58.35	1,135.71
08/30	Card Purchase 08/29 Wal-Mart #5672 Allen TX Card 4822	-13.50	1,122.21
08/30	Check # 344	-515.00	607.21
08/30	Paypal Inst Xfer Lifetouchns Web ID: Paypalsi77	-35.72	571.49
08/30	Check # 345	-10.00	561.49



August 21, 2019 through September 20, 2019

Primary Account [REDACTED] 4685

**TRANSACTION DETAIL** (continued)

DATE	DESCRIPTION	AMOUNT	BALANCE
09/03	Card Purchase 09/02 Target 00025163 Allen TX Card 4822	-6.37	555.12
09/04	Card Purchase 09/03 Kroger 0578 Wylie TX Card 4822	-24.61	530.51
09/05	Best Buy Auto Pymt 723032537100207 Web ID: Citiautldr	-28.00	502.51
09/06	Card Purchase 09/04 Chuck E Cheese 597 Allen TX Card 4822	-14.99	487.52
09/06	Card Purchase 09/04 Chuck E Cheese 597 Allen TX Card 4822	-20.00	467.52
09/06	Card Purchase 09/04 Chuck E Cheese 597 Allen TX Card 4822	-3.52	464.00
09/06	Paypal Inst Xfer Uzmazafarul Web ID: Paypalsi77	-10.00	454.00
09/09	Deposit 1888010786	5,000.00	5,454.00
09/09	Card Purchase 09/06 Apl*Itunes.Com/Bill 866-712-7753 CA Card 4822	-3.24	5,450.76
09/09	09/09 Online Payment 8515955149 To Best Buy	-50.00	5,400.76
09/09	09/09 Payment To Chase Card Ending IN 3455	-500.00	4,900.76
09/09	09/09 Payment To Chase Card Ending IN 3570	-200.00	4,700.76
09/09	09/09 Online Payment 8627118964 To Kohls	-100.00	4,600.76
09/09	09/09 Online Payment 8627120004 To Mr Cooper New Mortgage 2019	-1,900.00	2,700.76
09/09	09/09 Online Payment 8627123304 To Best Buy	-300.00	2,400.76
09/09	Capital One Online Pmt 925239910567273 Web ID: 9279744991	-450.00	1,950.76
09/10	Remote Online Deposit 1	800.00	2,750.76
09/10	Paypal Inst Xfer Usti Epay Web ID: Paypalsi77	-160.77	2,589.99
09/11	Card Purchase 09/10 Wal-Mart #5672 Allen TX Card 4822	-1.05	2,588.94
09/11	Card Purchase 09/10 Subway 00579490 Lucas TX Card 4822	-2.17	2,586.77
09/11	Card Purchase 09/10 Ulta #1489 Wylie TX Card 4822	-65.71	2,521.06
09/11	Chase Credit Crd Autopay 000000000167649 PPD ID: 4760039224	-100.00	2,421.06
09/12	09/12 Payment To Chase Card Ending IN 3570	-202.07	2,218.99
09/12	09/12 Payment To Chase Card Ending IN 3455	-400.00	1,818.99
09/13	Card Purchase 09/12 Murphy Express 8722 Allen TX Card 4822	-52.58	1,766.41
09/13	Card Purchase 09/12 Journeys 080270 Allen TX Card 4822	-108.22	1,658.19
09/13	Card Purchase 09/12 Coca Cola Buckner Dallas TX Card 4822	-2.00	1,656.19
09/13	Card Purchase 09/12 Coca Cola Buckner Dallas TX Card 4822	-1.75	1,654.44
09/13	Card Purchase 09/12 Target 00025163 Allen TX Card 4822	-31.29	1,623.15
09/13	Card Purchase 09/12 Target 00025163 Allen TX Card 4822	-11.77	1,611.38
09/13	Card Purchase 09/12 Taco Bell #29889 Allen TX Card 4822	-9.26	1,602.12
09/13	Paypal Inst Xfer Ultasalonco Web ID: Paypalsi77	-12.99	1,589.13
09/16	Card Purchase 09/13 Kroger 0578 Wylie TX Card 4822	-19.51	1,569.62
09/16	Card Purchase 09/14 Taco Bell #027875 Mckinney TX Card 4822	-26.78	1,542.84
09/16	Card Purchase 09/14 Taco Bell #027875 Mckinney TX Card 4822	-1.08	1,541.76
09/16	09/16 Transfer To Sav Xxxxx4172	-5.00	1,536.76
09/16	Card Purchase With Pin 09/16 Wal-Mart #6078 Wylie TX Card 4822	-19.28	1,517.48
09/16	Capital One Crcardpmt 925730180193522 Web ID: 9541719018	-50.00	1,467.48
09/17	Card Purchase 09/16 India Bazaar Plano Plano TX Card 4822	-26.66	1,440.82
09/17	Card Purchase 09/16 Oasis International Mar Plano TX Card 4822	-48.11	1,392.71
09/18	Card Purchase 09/16 Asia Salon Murphy TX Card 4822	-15.00	1,377.71
09/18	Card Purchase 09/16 Academic Outfitters Plano TX Card 4822	-70.37	1,307.34
09/18	Card Purchase 09/17 Agha Juice Plano TX Card 4822	-14.58	1,292.76
09/18	Card Purchase 09/17 Apl*Itunes.Com/Bill 866-712-7753 CA Card 4822	-5.40	1,287.36
09/18	T-Mobile Handset 5562882 Web ID: 0000450304	-152.99	1,134.37
09/20	Card Purchase Return 09/19 Target 00025502 Wylie TX Card 4822	10.83	1,145.20



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August 21, 2019 through September 20, 2019  
Primary Account: [REDACTED] 4685

## TRANSACTION DETAIL (continued)

DATE	DESCRIPTION	AMOUNT	BALANCE
09/20	Card Purchase 09/19 Target 00025502 Wylie TX Card 4822	-28.81	1,116.39
09/20	Card Purchase 09/20 Amzn Mktp US*Xd24Q71 Amzn.Com/Bill WA Card 4822	-16.50	1,099.89
09/20	Monthly Service Fee	-12.00	1,087.89
	<b>Ending Balance</b>		<b>\$1,087.89</b>

### WANT TO AVOID PAYING A MONTHLY SERVICE FEE ON YOUR CHECKING ACCOUNT?

A monthly Service Fee was charged to your Chase Total Checking account. Here are the three ways you can avoid this fee during any statement period.

- **Have direct deposits totaling \$500.00 or more.**  
(You did not have a direct deposit this statement period)  
*One of our bankers can help you set up direct deposit in just a few minutes.*
- **OR, keep a minimum daily balance in this checking account of \$1,500.00 or more.**  
(Your minimum daily balance was -\$73.73)
- **OR, keep an average daily balance of qualifying linked deposits and investments of \$5,000.00 or more.**  
(Your average daily balance of qualifying linked deposits and investments was \$859.19)

*Talk to a banker about transferring your balances to Chase today!*

**Stop in today and explore all Chase has to offer.**

## OVERDRAFT AND RETURNED ITEM FEE SUMMARY

	Total for This Period	Total Year-to-date
Total Overdraft Fees *	\$34.00	\$34.00
Total Returned Item Fees	\$0.00	\$0.00

\* Total Overdraft Fees includes Insufficient Funds Fees, and Extended Overdraft Fees

## CHASE SAVINGS

FATIMA ALI

Account Number: [REDACTED] 54172

## SAVINGS SUMMARY

	AMOUNT
<b>Beginning Balance</b>	<b>\$9.28</b>
Deposits and Additions	12.24
Other Withdrawals	-1.35
<b>Ending Balance</b>	<b>\$20.17</b>
Annual Percentage Yield Earned This Period	0.00%





August 21, 2019 through September 20, 2019

Primary Account: [REDACTED] 4685

## TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	<b>Beginning Balance</b>		<b>\$9.28</b>
08/21	ODP Transfer To Checking 000004420754685	-1.35	7.93
09/03	Remote Online Deposit 1	<b>7.24</b>	<b>15.17</b>
09/16	Transfer From Chk Xxxxx4685	<b>5.00</b>	<b>20.17</b>
	<b>Ending Balance</b>		<b>\$20.17</b>

**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:** Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC



10067700303000000063



August 21, 2019 through September 20, 2019  
Primary Account: [REDACTED] 54685

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**9.**

**DEBTOR HAS NO  
EMPLOYMENT  
AGREEMENT WITH  
EAGLE PROTECTION  
GROUP, INC**

Company Code Loc. Number Page  
RN / W3N 20987851 017 19846 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 10/07/2019  
Period Ending: 10/20/2019  
Pay Date: 10/31/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	77000.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$80,300.00</b>
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Statutory Deductions	this period	year to date
Federal Income	-590.87	13543.70
Social Security	-217.00	4978.60
Medicare	-50.75	1164.35

<b>Net Pay</b>	<b>\$2,641.38</b>	
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Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

32-2/1110

Payroll Check Number: 19846  
Pay Date: 10/31/2019

Pay to the  
order of:  
This amount:

Muhammad Siddiqi

TWO THOUSAND SIX HUNDRED FORTY ONE AND 38/100

**\$2,641.38**

**THIS IS NOT A CHECK**  
VOID - NON NEGOTIABLE VOID - NON NEGOTIABLE

CHASE

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code Loc/L Number Page  
RN / W3N 20987851 01/ 19840 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 09/23/2019  
Period Ending: 10/06/2019  
Pay Date: 10/17/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	73500.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$76,800.00</b>
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Statutory Deductions	this period	year to date
Federal Income	-590.87	12952.83
Social Security	-217.00	4761.60
Medicare	-50.75	1113.60

<b>Net Pay</b>	<b>\$2,641.38</b>	
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Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

32-2/1110

Payroll Check Number: 19840  
Pay Date: 10/17/2019

Pay to the  
order of:  
This amount:

Muhammad Siddiqi

TWO THOUSAND SIX HUNDRED FORTY ONE AND 38/100

**\$2,641.38**

**THIS IS NOT A CHECK**  
VOID - NON NEGOTIABLE VOID - NON NEGOTIABLE

CHASE

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code RN7W3N20987851 Loc/L 017 Number 19833 Page 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 09/09/2019  
Period Ending: 09/22/2019  
Pay Date: 10/03/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	70000.00
Bonus			0.00	3300.00

Gross Pay			\$3,500.00	\$73,300.00
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Statutory Deductions	this period	year to date
Federal Income	-590.87	12361.96
Social Security	-217.00	4544.60
Medicare	-50.75	1062.85

Net Pay	\$2,641.38	
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Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

32-2/1110

Payroll Check Number: 19833  
Pay Date: 10/03/2019

Pay to the  
order of:  
This amount:

Muhammad Siddiqi

TWO THOUSAND SIX HUNDRED FORTY ONE AND 38/100

\$2,641.38

**THIS IS NOT A CHECK**  
VOID - NON NEGOTIABLE VOID - NON NEGOTIABLE

CHASE

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code Loc/L Number Page  
RN7W3N 20987851 017 19827 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 08/26/2019  
Period Ending: 09/08/2019  
Pay Date: 09/19/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override: 10.00 Addnl  
Federal: 0 State: 0  
State: 0 Local: 0  
Local: 0  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	66500.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$69,800.00</b>
------------------	--	--	-------------------	--------------------

Statutory Deductions	this period	year to date
Federal Income	-590.87	11771.09
Social Security	-217.00	4327.60
Medicare	-50.75	1012.10

<b>Net Pay</b>	<b>\$2,641.38</b>	
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Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

32-2/1110

Payroll Check Number: 19827  
Pay Date: 09/19/2019

Pay to the  
order of:  
This amount:

Muhammad Siddiqi

TWO THOUSAND SIX HUNDRED FORTY ONE AND 38/100

**\$2,641.38**

**THIS IS NOT A CHECK**  
VOID - NON NEGOTIABLE VOID - NON NEGOTIABLE

CHASE

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code Loc. Number Page  
RN / W3N 20987851 017 6577967 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 08/12/2019  
Period Ending: 08/25/2019  
Pay Date: 09/05/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	63000.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$66,300.00</b>
------------------	--	--	-------------------	--------------------

Statutory Deductions	this period	year to date
Federal Income	-590.87	11180.22
Social Security	-217.00	4110.60
Medicare	-50.75	961.35
<b>Net Pay</b>	<b>\$2,641.38</b>	

Deposits	transit/ABA	amount
account number		
XXXXXX1773	XXXXXXXXXX	2641.38

Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

Pay Date: 09/05/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXX1773	XXXXXXXXXX	2641.38

**THIS IS NOT A CHECK**

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150



Company Code Loc/L Number Page  
RN / W3N 20987851 01/ 6544897 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 07/29/2019  
Period Ending: 08/11/2019  
Pay Date: 08/22/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	59500.00
Bonus			0.00	3300.00
<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$62,800.00</b>

Statutory Deductions	this period	year to date
Federal Income	-590.87	10589.35
Social Security	-217.00	3893.60
Medicare	-50.75	910.60
<b>Net Pay</b>	<b>\$2,641.38</b>	

Deposits	transit/ABA	amount
account number		
XXXXXXXX1773	XXXXXXXXXX	2641.38

Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

Pay Date: 08/22/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXXXX1773	XXXXXXXXXX	2641.38

**THIS IS NOT A CHECK**

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code Loc/Dept Number Page  
RN / W3N 20987851 01/ 6411746 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 06/03/2019  
Period Ending: 06/16/2019  
Pay Date: 06/27/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	45500.00
Bonus			0.00	3300.00
<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$48,800.00</b>

Statutory Deductions	this period	year to date
Federal Income	-590.87	8225.87
Social Security	-217.00	3025.60
Medicare	-50.75	707.60
<b>Net Pay</b>	<b>\$2,641.38</b>	

Deposits account number	transit/ABA	amount
XXXXXX1773	XXXXXXXXXX	2641.38

Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

Pay Date: 06/27/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXX1773	XXXXXXXXXX	2641.38

**THIS IS NOT A CHECK**

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Company Code Loc/Dept Number Page  
RN / W3N 20987851 01/ 6379371 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 05/20/2019  
Period Ending: 06/02/2019  
Pay Date: 06/13/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override: 10.00 Addnl  
Federal: 0  
State: 0  
Local: 0  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	42000.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$45,300.00</b>
------------------	--	--	-------------------	--------------------

Statutory Deductions	this period	year to date
Federal Income	-590.87	7635.00
Social Security	-217.00	2808.60
Medicare	-50.75	656.85

<b>Net Pay</b>	<b>\$2,641.38</b>	
----------------	-------------------	--

Deposits	account number	transit/ABA	amount
XXXXXX1773	XXXXXXXXXX		2641.38

Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

Pay Date: 06/13/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXX1773	XXXXXXXXXX	2641.38

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

THIS IS NOT A CHECK

Company Code Loc/Dept Number Page  
RN / W3N 20987851 01/ 6341546 1 of 1  
EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

## Earnings Statement



Period Starting: 05/06/2019  
Period Ending: 05/19/2019  
Pay Date: 05/30/2019

Taxable Marital Status: Single  
Exemptions/Allowances: Tax Override:  
Federal: 0 Federal: 10.00 Addnl  
State: 0 State:  
Local: 0 Local:  
Social Security Number: XXX-XX-XXXX

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

Earnings	rate	hours/units	this period	year to date
Regular		0.00	3500.00	38500.00
Bonus			0.00	3300.00

<b>Gross Pay</b>			<b>\$3,500.00</b>	<b>\$41,800.00</b>
------------------	--	--	-------------------	--------------------

Statutory Deductions	this period	year to date
Federal Income	-590.87	7044.13
Social Security	-217.00	2591.60
Medicare	-50.75	606.10
<b>Net Pay</b>	<b>\$2,641.38</b>	

Deposits account number	transit/ABA	amount
XXXXXX1773	XXXXXXXXXX	2641.38

Your federal taxable wages this period are \$3,500.00

EAGLE PROTECTIVE GROUP INC  
PO BOX 814392  
DALLAS, TX 75234

Pay Date: 05/30/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXX1773	XXXXXXXXXX	2641.38

**THIS IS NOT A CHECK**

Muhammad Siddiqi  
3020 Big Town Blvd  
Mesquite, TX 75150

# 10.

# Debtors Passport

5614200178USA7501207M2811198551931790<100748

# 11.

# Formation Documents

**Form 201**  
**(revised 6/01)**

Return in Duplicate to:  
Secretary of State  
P.O. Box 13697  
Austin, TX 78711-3697  
FAX: 512/463-5709  
Filing Fee: \$300



This space reserved for office use.

**Articles of Incorporation**  
**Pursuant to Article 3.02**  
**Texas Business**  
**Corporation Act**

FILED  
In the Office of the  
Secretary of State of Texas

**MAR 10 2003**

**Corporations Section**

**Article 1 - Corporate Name**

The name of the corporation is as set forth below:

**EAGLE PROTECTIVE GROUP, INC.**

The name must contain the word "corporation," "company," "incorporated," or an abbreviation of one of these terms. The name must not be the same as, deceptively similar to or similar to that of an existing corporate, limited liability company, or limited partnership name on file with the secretary of state. A preliminary check for "name availability" is recommended.

**Article 2 - Registered Agent and Registered Office (Select and complete either A or B and complete C)**

☐ A. The initial registered agent is a corporation (cannot be corporation named above) by the name of:

**OR**

☒ B. The initial registered agent is an individual resident of the state whose name is set forth below:

First Name	M.I.	Last Name	Suffix
JAMELA		SIDDIQI	

C. The business address of the registered agent and the registered office address is:

Street Address	City	TX	Zip Code
5001 SPRINGVALLEY RD., STE 400 E	DALLAS		75244

**Article 3 - Directors**

The number of directors constituting the initial board of directors and the names and addresses of the person or persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and qualified are set forth below:

Director 1: First Name	M.I.	Last Name	Suffix
JAMELA		SIDDIQI	

Street Address	City	State	Zip Code
5001 Springvalley Rd., Ste 400 E	DALLAS	TEXAS	75244

Director 2: First Name	M.I.	Last Name	Suffix

Street Address	City	State	Zip Code

Director 3: First Name	M.I.	Last Name	Suffix

Street Address	City	State	Zip Code



**Article 4 – Authorized Shares**

☐ A. The total number of shares the corporation is authorized to issue is \_\_\_\_\_ and the par value of each of the authorized shares is \$ \_\_\_\_\_

**OR (You must select and complete either option A or option B, do not select both.)**

☒ B. The total number of shares the corporation is authorized to issue is 1 and the shares shall have no par value.

If the shares are to be divided into classes, you must set forth the designation of each class, the number of shares of each class, the par value (or statement of no par value), and the preferences, limitations, and relative rights of each class in the space provided for supplemental information on this form.

**Article 5 – Initial Capitalization**

The corporation will not commence business until it has received for the issuance of its shares consideration of the value of one thousand dollars (\$1,000).

**Article 6 – Duration**

The period of duration is perpetual.

**Article 7 – Purpose**

The purpose for which the corporation is organized is for the transaction of any and all lawful business for which corporations may be incorporated under the Texas Business Corporation Act.

**Supplemental Provisions/Information**

Text Area

[The attached addendum are incorporated herein by reference.]

**Incorporator**

The name and address of the incorporator is set forth below.

Name:  
JAMELA SIDDIQI

Street Address	City	State	Zip Code
5001 Springvalley Rd., 400 E	DALLAS	TEXAS	75244

**Effective Date of Filing**

☒ This document will become effective when the document is filed by the secretary of state.

**OR**

☐ This document will become effective at a later date, which is not more than ninety (90) days from the date of its filing by the secretary of state. The delayed effective date is \_\_\_\_\_

**Execution**

The undersigned incorporator signs these articles of incorporation subject to the penalties imposed by law for the submission of a false or fraudulent document.

Signature of incorporator

*Jameela Siddiqi*

**12.**

**MOTION AND ORDER  
FOR CONTEMPT IN  
ROPAL LAWSUIT**

Jeremy Jones

Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**MOTION FOR CONTEMPT AGAINST  
MOHAMMAD NASIR SIDDIQI**

Ropal Entertainment, LLC (“Ropal”) files this Motion for Contempt Against Mohammad Nasir Siddiqi (“Siddiqi”) and shows:

1. On March 8, 2019, Ropal obtained Final Judgment against Hiba Entertainment, Inc., Mohammad Nasir Siddiqi, and Azhar Qasmi. No Motion for New Trial was filed or appeal undertaken by any of the Defendants, and the judgment obtained by Ropal is final for all purposes.

2. On April 11, 2019, Ropal served post-judgment discovery requests on Siddiqi. The time period within which Siddiqi was required to respond to Ropal’s post-judgment discovery requests has long past, and Siddiqi intentionally made no response whatsoever.

3. Because Siddiqi failed to comply with his legal duties to respond to Ropal’s post-judgment discovery requests as required by law, this Court entered an Order compelling Siddiqi to respond to the post-judgment discovery requests and sanctioning Siddiqi for his non-compliance with these duties as required by the Texas Rules of Civil Procedure. By this Order Granting Motion

to Compel and for Sanctions dated June 13, 2019, Siddiqi was required to answer discovery and pay sanctions in the amount of \$1,000.00 on or before June 23, 2019. Siddiqi was served with a copy of the Order by email on June 13, 2019. [A true and correct cop of this email is attached as Exhibit 1.]

4. Siddiqi did not comply with the Court's Order; he has provided only incomplete responses to the discovery requests and paid only \$100.00 of the ordered \$1,000.00 in sanctions. [A true and correct copy of Siddiqi's incomplete discovery responses is attached as Exhibit 2.]

5. Siddiqi's failure to provide written responses to discovery and failure to pay sanctions as ordered by this Court constitutes contempt of the Court. Because Siddiqi continues to flout the Court's authority and ignore his obligations under the Texas Rules of Civil Procedure and the Orders of this Court, Ropal requests that Siddiqi be held in contempt so as to coerce his compliance with the Orders of this Court and the Texas Rules of Civil Procedure. The Court is authorized to grant this relief pursuant to Texas Government Code Section 21.002. Pursuant to such authority, Siddiqi should be fined in an amount not to exceed One Hundred Dollars (\$100.00) and should be incarcerated in jail until such time as Siddiqi fully complies with the Court's prior Order. Further, the Court should order that Siddiqi pay to Ropal's counsel additional sanctions in the amount of not less than One Thousand Five Hundred Dollars (\$1,500.00), necessitated to reimburse Ropal for the bringing of this Motion for Contempt, and further order that failure to pay such additional sanctions will constitute an additional act of contempt.

**Request for Relief**

Ropal requests that the Court issue an Order to Show Cause, requiring Siddiqi to personally appear and to show cause why he should not be held in contempt of court, fined and incarcerated. Ropal further requests that the Court award additional sanctions for Siddiqi's continuing failure to comply with the Court's Order that he respond to post-judgment discovery requests and pay sanctions, and grant it all other relief to which it is entitled.

Respectfully submitted,



Michael J. Vernone  
State Bar No. 20553400

NEEDHAM ☐ VERNONE  
1412 Main Street, Suite 1400  
Dallas, Texas 75202  
Telephone: (214) 741-7447  
Facsimile: (214) 761-1910  
Email: [mvernone@earthlink.com](mailto:mvernone@earthlink.com)

ATTORNEYS FOR ROPAL  
ENTERTAINMENT, LLC

**Order Setting Hearing Date**

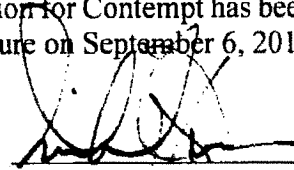
The foregoing Motion for Contempt is hereby set for hearing in the Courtroom of the 193<sup>rd</sup> Judicial District Court, Dallas County, Texas, at \_\_\_\_\_ .m. o'clock on \_\_\_\_\_, 2019.

Signed this \_\_\_\_\_, 2019.

\_\_\_\_\_  
Honorable Judge Presiding

**Certificate of Service**

The undersigned certifies the foregoing Motion for Contempt has been served on all parties in accordance with the Texas Rules of Civil Procedure on September 6, 2019.

  
\_\_\_\_\_  
Michael J. Vernone

**Michael J Vernone**

---

**From:** Michael J Vernone <mvernone@earthlink.net>  
**Sent:** Thursday, June 13, 2019 2:59 PM  
**To:** 'Hiba Entertainment Inc usa tx'  
**Subject:** Ropal Entertainment v. Hiba Entertainment, Siddiqi and Qasmi  
**Attachments:** Ropal Signed Order Granting MTC Hiba.pdf; Ropal Signed Order Granting MTC Siddiqi.pdf  
  
**Importance:** High

Mr. Siddiqi,

To date you have failed and refused to respond to our post-judgment discovery requests, despite your repeated representations that you would do so.

As a result, I filed a Motion to Compel and for Sanctions. The Court held a hearing this morning, and granted the motion in its entirety.

A copy of the Order granting the motion is attached.

Pursuant to the Order, you must fully respond to the post-judgment discovery requests on or before Monday, June 24, 2019.

Additionally, you must pay \$1,000.00 in sanctions for your failure to respond to discovery. This payment is also due within 10 days from today. Payment should be made payable to "Law Offices of Michael J. Vernone", and must be received by me here at my office on or before Monday, June 24, 2019.

Failure to comply with the Court's Order will subject you to additional penalties for being in contempt of Court.

Michael J Vernone  
Attorney  
Needham – Vernone  
1412 Main Street, Suite 1400  
Dallas, TX 75202  
Tel: 214-741-7447  
Fax: 214-761-1910  
mvernone@earthlink.net

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Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**ORDER GRANTING  
PLAINTIFF'S MOTION TO COMPEL RESPONSES FROM  
MOHAMMAD NASIR SIDDIQI TO  
POST-JUDGMENT DISCOVERY AND FOR SANCTIONS**

On this day the Court considered the Motion to Compel and for Sanctions filed by Ropal Entertainment, LLC ("Ropal") against Mohammad Nasir Siddiqi ("Siddiqi"). Upon consideration of the Motion and the arguments of counsel, the Court finds that the Motion is well taken and should be GRANTED.

IT IS THEREFORE ORDERED that Siddiqi must serve upon counsel for Ropal, Michael J. Vernone, written responses to Ropal's Post-Judgment Interrogatories and Requests for Production within ten (10) days of the date this Order is signed.

IT IS FURTHER ORDERED that Siddiqi must pay to Michael J. Vernone, attorney for Ropal, \$ 1000<sup>00</sup> as sanctions for his failure to timely respond to the post-discovery requests served upon him by Ropal, necessitating the filing and hearing of this Motion to Compel.

**ORDER GRANTING PLAINTIFF'S MOTION TO COMPEL RESPONSES FROM MOHAMMAD NASIR SIDDIQI TO POST JUDGMENT DISCOVERY AND FOR SANCTIONS - Page 1**  
*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al;* Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas



IT IS FURTHER ORDERED that this payment must be made by Siddiqi such that it is received by Michael J. Vernone on or before the expiration of ten (10) days from the date this Order is signed.

Signed June 13, 2019.

  
\_\_\_\_\_  
Honorable Judge Presiding

**ORDER GRANTING PLAINTIFF'S MOTION TO COMPEL RESPONSES FROM MOHAMMAD NASIR SIDDIQI TO POST JUDGMENT DISCOVERY AND FOR SANCTIONS - Page 2**  
*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

From,  
Mohammed N Siddiqi

H/D

MICHAEL VERNONE

Exhibit 2



Sir, YOUR FEES \$ 100.00 I don't have at this time if you ple Exced \$ 100 payment For To-day your Balance will BE PAID and full with in the month

Thanks

Muhammad Siddiq  
42448375055

**M. SIDDIQI**  
 3020 Big Town Blvd  
 Mesquite, TX 75150-2412

32-61/1110

1576

JUNE 20, 19

PAY TO THE ORDER OF LAN OFFICES OF MICHAEL VERNONE \$ 100.00

ONE HUNDRED & ONLY DOLLARS

**CHASE BANK**  
 DALLAS TX 75201

FOR M. VERNONE PAYMENT: Musun

1 1 1 1 0 0 0 6 1 4 1

1 1 1 5 7 6

Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**POST-JUDGMENT INTERROGATORIES TO  
MOHAMMAD NASIR SIDDIQI**

TO: Mohammad Nasir Siddiqi, *pro se*, 14411 Tanglewood Drive, Farmers Branch, Texas 75234.

Pursuant to Texas Rules for Civil Procedure 196 and 621a, Ropal Entertainment, LLC ("Ropal"), Plaintiff, serves these Post-Judgment Interrogatories on Mohammad Nasir Siddiqi ("Siddiqi"), Defendant. Siddiqi is required to serve a sworn written response on Ropal within thirty (30) days after the service of these Interrogatories.

**Definitions**

1. "You", "Your" or "Siddiqi" shall mean and include Mohammad Nasir Siddiqi, his attorneys, agents or other persons or entities acting or purporting to act on his behalf.
2. "Ropal" means Ropal Entertainment, LLC.
3. "Identify" means to provide any and all information necessary, useful or helpful in identifying what any asset or debt is, where it is located, the persons or entities having physical possession of the asset or debt, its origin, and/or its value, both at time of acquisition and as of the

date of responding to these Post-judgment Interrogatories; "identify" shall include but not be limited to provision of account numbers, serial numbers, policy numbers, descriptions of size and weight, color, and any and all identifying features; "identify" shall also include a statement as to correct value, balance owed or owing, or face value; as to a person or entity, "identify" means to provide the full legal name, any aliases or nicknames, any trade names, current residence and business address, all telephone numbers, all email addresses, all web sites, and all social media contact information; as to a document, "identify" means to state its date of creation, subject matter, length in pages, medium of creation and transmission, and to identify all persons or entities involved in its creation or authorship, its transmissions, or who received it.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 2**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

### Interrogatories

#### INTERROGATORY NO. 1:

Please state your full legal name, any aliases used by you or by which you have been known, residence and business addresses, telephone numbers, fax numbers, email addresses, web site/addresses/URLs, social media accounts, driver's license number, state ID card number, social security number, and passport number and country of issuance.

RESPONSE:

MOHAMMAD NASIR SIDDIQI  
FAX 15630727  
S # 641-62-2222

#### INTERROGATORY NO. 2:

NOTE - I don't this information confidential  
S # FAX # NOT be disclose them

Please state the name and address of your current employer, business address, your job title and responsibilities; if you are self-employed, so state and identify all businesses and business ventures in which you are engaged, stating the nature of your involvement and duties in each such business or venture.

EAGLE PROTECTIVE GROUP INC  
HIRING DEPARTMENT. (HR)

RESPONSE: 3010 LBJ Freeway  
DALLAS, TX 75234

(SECURITY BUSINESS)

#### INTERROGATORY NO. 3:

Identify each bank account owned by you or as to which you have or had signatory authority which was open at any time from January 1, 2014 to present, whether each account is now open or closed,

CHASE BANK (CLOSED) Business  
CHASE BANK (OPEN) Personal

POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 3

Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

and state its highest, lowest and current balance as of your date of Response to these Interrogatories.

RESPONSE: CHASE ~~BANK~~  
BALANCE AS OF TODAY \$164.98  
TEXAS CREDIT UNION BALANCE \$1824.58  
SAVING Acct-  
\$332.41  
CHECKING Acct

**INTERROGATORY NO. 4:**

Identify each bank account owned by your spouse or domestic partner which was open at any time from January 1, 2014 to present, whether each account is now open or closed, and state its highest, lowest and current balance as of your date of Response to these Interrogatories.

RESPONSE: NONE

**INTERROGATORY NO. 5:**

Identify each insurance policy of any and every kind and nature, including but not limited to life, homeowners, business and auto (with all schedules, riders, supplements and endorsements), on which you paid any premium from January 1, 2014 to present or of which you were or are the owner or beneficiary of the policy.

RESPONSE: NONE

**INTERROGATORY NO. 6:**

Identify each insurance policy of any and every kind and nature, including but not limited to life, homeowners, business and auto (with all schedules, riders, supplements and endorsements), on which your spouse or domestic partner paid any premium from January 1, 2014 to present or of which your spouse or domestic partner was or is the owner or beneficiary of the policy.

RESPONSE: INSURANCE FOR CAR  
NO LIFE INSURANCE

**INTERROGATORY NO. 7:**

Identify all United States Income Tax returns filed by you, including information returns and declarations of estimated tax, for the tax years 2014 through 2018, inclusive.

RESPONSE: ATTACHED

**INTERROGATORY NO. 8:**

Identify all United States Income Tax returns filed by your spouse or domestic partner, including information returns and declarations of estimated tax, for the tax years 2015 through 2018, inclusive.

RESPONSE: NONE



**INTERROGATORY NO. 9:**

Identify each parcel, tract or interest in real estate in which you have or have had any legal or equitable interest from January 1, 2014, to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 10:**

Identify each parcel, tract or interest in real estate in which your spouse or domestic partner has or has had any legal or equitable interest from January 1, 2014, to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 11:**

Identify each certificate of common or preferred capital stock or other security or ownership interest of or in any corporation, limited liability company, limited liability partnership, limited partnership, partnership, mutual fund, bond fund, investment trust and/or franchise or franchise agreement in which you have any legal or equitable interest from January 1, 2014, to the present.

**RESPONSE:**

Hiba ENTERTAINMENT INC  
PRESENT

**INTERROGATORY NO. 12:**

Identify each certificate of common or preferred capital stock or other security or ownership interest of any corporation, limited liability company, limited liability partnership, limited partnership, partnership, mutual fund, bond fund, investment trust and/or franchise or franchise agreement in which your spouse or domestic partner has any legal or equitable interest from January 1, 2014, to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 13:**

Identify each appraisal done within the preceding sixty (60) months on any real or personal property in which you own any legal or equitable interest, and each appraisal ever done with respect to any real or personal property currently owned or possessed by you.

**RESPONSE:**

N/A

**INTERROGATORY NO. 14:**

Identify each appraisal done within the preceding sixty (60) months on any real or personal property in which your spouse or domestic partner owns any legal or equitable interest, and each appraisal ever done with respect to any real or personal property currently owned or possessed by your spouse or domestic partner.

/

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 7**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

N/A

**INTERROGATORY NO. 15:**

Identify each lease of real or personal property or other executory contract of whatever kind or nature to which you are a party or in which you have any current or future legal or equitable interest.

**RESPONSE:**

**INTERROGATORY NO. 16:**

Identify each lease of real or personal property or other executory contract of whatever kind or nature to which your spouse or domestic partner is a party or in which your spouse or domestic partner has any current or future legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 17:**

Identify each note, security document, guaranty, credit account, charge account and any other indebtedness owed by you to any other person or entity.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 8**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

NONE

**INTERROGATORY NO. 18:**

Identify each note, security document, guaranty, credit account, charge account and any other indebtedness owed by your spouse or domestic partner to any other person or entity.

**RESPONSE:**

NONE

**INTERROGATORY NO. 19:**

Identify each note, security document, guaranty, open account, invoice, and any other indebtedness owed to you by any other person or entity.

**RESPONSE:**

NONE

**INTERROGATORY NO. 20:**

Identify each note, security document, guaranty, open account, invoice, and any other indebtedness owed to your spouse or domestic partner by any other person or entity.

**RESPONSE:**

NONE

**INTERROGATORY NO. 21:**

Identify each financial statement issued by you or on your behalf to any entity, including any financial institution, from January 1, 2014, to the present.

RESPONSE:

CHASE RESERVE BANK

**INTERROGATORY NO. 22:**

Identify each financial statement issued by your spouse or domestic partner to any entity, including any financial institution, from January 1, 2014, to the present.

RESPONSE:

NONE

**INTERROGATORY NO. 23:**

Identify each stock brokerage or other investment or retirement account in which you own or have owned any legal or equitable interest from January 1, 2014, to the present.

RESPONSE:

NONE

**INTERROGATORY NO. 24:**

Identify each stock brokerage or other investment or retirement account in which your spouse or domestic partner owns or has owned any legal or equitable interest from January 1, 2014, to the

NONE

present.

**RESPONSE:**

**INTERROGATORY NO. 25:**

Identify each financial statement, including balance sheets, profit and loss statements and statements of changes in financial position issued since January 1, 2014, by any business in which you own or have owned any legal or equitable interest.

**RESPONSE:**

CHASE BANK (Hiba ENTERTAINMENT)

**INTERROGATORY NO. 26:**

Identify each financial statement, including balance sheets, profit and loss statements and statements of changes in financial position issued since January 1, 2014, by any business in which your spouse or domestic partner owns or has owned any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 27:**

Identify each sole proprietorship, limited liability company, limited liability partnership, joint venture, limited partnership, general partnership, and/or any other business in which you own or

ONLY Hiba ENTERTAINMENT

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 11**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

have owned any legal or equitable interest from January 1, 2014 to the present.

**RESPONSE:**

NO PARTNER SHIP /  
ONLY Hiba ENTERTAINMENT.

**INTERROGATORY NO. 28:**

Identify each sole proprietorship, limited liability company, limited liability partnership, joint venture, limited partnership, general partnership, and/or any other business in which your spouse or domestic partner owns or has owned any legal or equitable interest from January 1, 2014 to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 29:**

Identify each motorcycle, automobile, truck, cab, motor home, mobile home, boat, airplane, or livestock in which you own any legal or equitable interest.

**RESPONSE:**

I DID NOT OWN ANY VEHICLE  
OR TRUCK.

**INTERROGATORY NO. 30:**

Identify each motorcycle, automobile, truck, cab, motor home, mobile home, boat, airplane, or livestock in which your spouse or domestic partner owns any legal or equitable interest.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 12**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

NONE

**INTERROGATORY NO. 31:**

Identify each United States Gift Tax return filed by you or on your behalf within the last ten (10) years.

**RESPONSE:**

NONE

**INTERROGATORY NO. 32:**

Identify each United States Gift Tax return filed by your spouse or domestic partner, or on their behalf, within the last ten (10) years.

**RESPONSE:**

NONE

**INTERROGATORY NO. 33:**

Identify each Last Will and Testament and/or Codicil related thereto executed by you.

**RESPONSE:**

NONE



**INTERROGATORY NO. 34:**

Identify each Last Will and Testament and/or Codicil related thereto executed by your spouse or domestic partner.

RESPONSE:

NONE

**INTERROGATORY NO. 35:**

Identify each Last Will and Testament and/or Codicil related thereto under which you stand to receive any property of any kind in any capacity.

RESPONSE:

NONE

**INTERROGATORY NO. 36:**

Identify each Last Will and Testament and/or Codicil related thereto under which your spouse or domestic partner stands to receive any property of any kind in any capacity.

RESPONSE:

NONE

**INTERROGATORY NO. 37:**

Identify each piece of jewelry, including watches, having a value of \$100.00 or greater, in which you own any legal or equitable interest.

⑤ WATCH  
\$ 400 EACH

**RESPONSE:**

**INTERROGATORY NO. 38:**

Identify each piece of jewelry, including watches, having a value of \$100.00 or greater, in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 39:**

Identify each precious or semiprecious gemstone having a value in excess of \$100.00 in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 40:**

Identify each precious or semiprecious gemstone having a value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

NONE

**RESPONSE:**

**INTERROGATORY NO. 41:**

Identify each item made or consisting of precious metals of any sort, and whether in raw, cast or jewelry form, having a value of greater than \$100.00 (whether singularly or collectively as in the case of coins, ingots, or other collections), in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 42:**

Identify each item made or consisting of precious metals of any sort, and whether in raw, cast or jewelry form, having a value of greater than \$100.00 (whether singularly or collectively as in the case of coins, ingots, or other collections), in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 43:**

Identify each work of art (painting, sculpture, lithograph, serigraph, or other) having a value of greater than \$100.00 in which you own any legal or equitable interest.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 16**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

NONE

**INTERROGATORY NO. 44:**

Identify each work of art (painting, sculpture, lithograph, serigraph, or other) having a value of greater than \$100.00 in which your spouse or domestic partner own any legal or equitable interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 45:**

Identify each article of clothing having original purchase price or fair market value in excess of \$100.00 in which you own any legal or equitable interest.

**RESPONSE:**

PAINT - SHIRT - SUITS OTHERS

**INTERROGATORY NO. 46:**

Identify each article of clothing having original purchase price or fair market value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE NONE

**INTERROGATORY NO. 47:**

Identify each electrical appliance, including computers and related equipment, telephones, cell phones, etc., having an original purchase price or original fair market value in excess of \$100.00 in which you own any legal or equitable interest.

RESPONSE: ONE LAPTOP \$ 459.00  
PHONE \$ 200.00

**INTERROGATORY NO. 48:**

Identify each electrical appliance, including computers and related equipment, telephones, cell phones, etc., having an original purchase price or original fair market value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

RESPONSE: NONE

**INTERROGATORY NO. 49:**

Identify each driver's license and/or government issued identification issued to you in the preceding ten (10) years providing driver's license number or identification number, state of issuance, name in which it was held, and residence or other address identified thereon.

RESPONSE: ONLY ONE TXDL FOR TEXAS  
DRIVER LIC  
TXDL # 15630727

**INTERROGATORY NO. 50:**

Please state your United States Social Security Number.

RESPONSE:

[REDACTED] - 2222

**INTERROGATORY NO. 51:**

Identify each location of residence or business maintained by you for a period of more than one month at any time during the period from January 1, 2014 to present.

RESPONSE:

Hiba ENTERTAINMENT.

**INTERROGATORY NO. 52:**

Identify each employer and any other person or entity who has paid you monetary or non-monetary compensation for labor or personal services, whether or not such person or entity provided you with a Form W-2, Form 1099 or other statement of wages paid or taxes withheld for the period January 1, 2014, to present.

RESPONSE:

EAGLE PROTECTIVE GROUP INC

**INTERROGATORY NO. 53:**

Identify each employer and any other person or entity who has paid your spouse or domestic

NONE

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 19**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

partner monetary or non-monetary compensation for labor or personal services, whether or not such person or entity provided your spouse or domestic partner with a Form W-2, Form 1099 or other statement of wages paid or taxes withheld for the period January 1, 2014, to present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 54:**

Identify each person or entity having possession of any real or personal property in which you own a legal or beneficial interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 55:**

Identify each person or entity having possession of any real or personal property in which your spouse or domestic partner owns a legal or beneficial interest.

**RESPONSE:**

NONE

**INTERROGATORY NO. 56:**

Identify each safety deposit box, safe or vault in which is located any personal property in which you own any legal or equitable interest, and identify the contents of each such safety deposit box,

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 20**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

safe or vault.

RESPONSE:

CHASE BANK  
① SAFETY BOX

**INTERROGATORY NO. 57:**

Identify each safety deposit box, safe or vault in which is located any personal property in which your spouse or domestic partner owns any legal or equitable interest.

RESPONSE:

NONE

**INTERROGATORY NO. 58:**

State your country of birth, country of citizenship, and identify any and all papers, permits, or documents which authorize your presence and/or residence within the United States of America, including but not limited to dates of issuance and dates of expiration of each such paper, permit, or document.

RESPONSE:

PAKISTAN (SINH)  
USA CITIZENSHIP

**INTERROGATORY NO. 59:**

Identify each claim of copyright, patent, trademark or other claim of intellectual property, whether registered or not, in which you have or have had a legal or beneficial interest since January 1, 2014

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 21**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas



to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 60:**

Identify each claim of copyright, patent, trademark or other claim of intellectual property, whether registered or not, in which your spouse or domestic partner has or has had a legal or beneficial interest since January 1, 2014 to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 61:**

Identify each article, essay, book, manuscript, manual, song lyric or melody, recording, or other work of the written or spoken word, whether published or not, in which you have or have had a legal or beneficial interest since January 1, 2014 to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 62:**

Identify each article, essay, book, manuscript, manual, song lyric or melody, recording, or other work of the written or spoken word, whether published or not, in which your spouse or domestic

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 22**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

partner has or has had a legal or beneficial interest since January 1, 2014 to the present.

**RESPONSE:**

NONE

**INTERROGATORY NO. 63:**

Please state the amount of all wages or any other compensation and provide a full description of how all other compensation is computed and paid to you (whether commission, bonus, etc.) from any employment, venture, contractor relationship and the like for each year from 2014 to the present, including year-to-date for the current year.

**RESPONSE:**

**INTERROGATORY NO. 64:**

Please state the amount of all wages or any other compensation and provide a full description of how all other compensation is computed and paid to your spouse or domestic partner (whether commission, bonus, etc.) from any employment, venture, contractor relationship and the like for each year from 2014 to the present, including year-to-date for the current year.

**RESPONSE:**

NONE

**INTERROGATORY NO. 65:**

Please state the full name and address of all businesses in which you have had any ownership interest since January 1, 2014, together with a description of the business and your interest therein.

RESPONSE: Hiba Entertainment INC

**INTERROGATORY NO. 66:**

Please state the full name and address of all businesses in which your spouse or domestic partner has had any ownership interest since January 1, 2014, together with a description of the business and your spouse or domestic partner's interest therein.

RESPONSE: NONE

**INTERROGATORY NO. 67:**

Describe all income (whether monetary or in-kind) received by you from any and every source other than wages, stating the amount, source, name of payor, and the basis for such payment or transfer, from January 1, 2014, to the present.

RESPONSE: ?

**INTERROGATORY NO. 68:**

Describe all income (whether monetary or in-kind) received by your spouse or domestic partner from every source other than wages, stating the amount, source, name of payor, and the basis for such payment or transfer, from January 1, 2014, to the present.

RESPONSE:

NONE

**INTERROGATORY NO. 69:**

If you have authority to sign checks or other instruments on any bank, institutional or other account not identified in Response to Interrogatory No. 3, please identify the bank or institution, account number, and owner of the account.

RESPONSE:

NONE

**INTERROGATORY NO. 70:**

If your spouse or domestic partner has authority to sign checks or other instruments on any bank, institutional or other account not identified in Response to Interrogatory No. 3, please identify the bank or institution, account number, and owner of the account.

RESPONSE:

NONE

**INTERROGATORY NO. 71:**

Itemize in detail all assets, whether tangible or intangible, having a fair market value in excess of \$100.00 owned by you, stating a description of the asset, its fair market value, and location.

**RESPONSE:**

NONE

**INTERROGATORY NO. 72:**

Identify in detail all assets, whether tangible or intangible, having a fair market value in excess of \$100.00 owned by your spouse or domestic partner, stating a description of the asset, its fair market value, and location.

**RESPONSE:**

NONE

**INTERROGATORY NO. 73:**

Identify all commodities, stock and other securities owned by you; please state: the number of shares, the name of the entity, present location, description of certificates or other evidence of ownership, serial or identifying number of each, and current market value.

**RESPONSE:**

NONE

**INTERROGATORY NO. 74:**

Identify all commodities, stock and other securities owned by your spouse or domestic partner; please state: the number of shares, the name of the entity, present location, description of certificates or other evidence of ownership, serial or identifying number of each, and current market value.

RESPONSE:

NONE

**INTERROGATORY NO. 75:**

Identify all jewelry, antiques or other collectibles owned by you, including a full description, the fair market value and location of each.

RESPONSE:

⑤ WATCH  
EACH WATCH \$400 EACH

**INTERROGATORY NO. 76:**

Identify all jewelry, antiques or other collectibles owned by your spouse or domestic partner, including a full description, the fair market value and location of each.

RESPONSE:

NONE

**INTERROGATORY NO. 77:**

Identify each a boat, motor vehicle, trailer, airplane, gun or animal in which you own a legal or any beneficial interest; please state the purchase price, current indebtedness, location, serial or model number of each, and a complete description of each item.

RESPONSE: ONLY ONE GUN WAS MY  
NAME I SOLD FOR \$450.<sup>00</sup>

**INTERROGATORY NO. 78:**

Identify each boat, motor vehicle, trailer, airplane, gun or animal in which your spouse or domestic partner owns any legal or beneficial interest; please state the purchase price, current indebtedness, location, serial or model number of each, and a complete description of each item.

RESPONSE: NONE

**INTERROGATORY NO. 79:**

Identify each person who owes you money, including name and address of debtor, the basis of the indebtedness and amount owed, and identify each document evidencing such indebtedness.

RESPONSE: MOHAMMAD ABBASI - \$50,000  
AZHAR QASMI \$25,000

**INTERROGATORY NO. 80:**

Identify each person who owes your spouse or domestic partner money, including name and address of debtor, the basis of the indebtedness and amount owed, and identify each document evidencing such indebtedness.

RESPONSE:

NONE

**INTERROGATORY NO. 81:**

Identify all mortgages, liens, promissory notes or other encumbrances held by you, or attach a copy of each to your Answers; include in your Answer all amounts still owing to you and when the obligation is anticipated to be retired.

RESPONSE:

ATTACHED

**INTERROGATORY NO. 82:**

Identify all mortgages, liens, promissory notes or other encumbrances held by your spouse or domestic partner, or attach a copy of each to your Answers; include in your Answer all amounts still owing to your spouse or domestic partner and when the obligation is anticipated to be retired.

RESPONSE:

NONE



**INTERROGATORY NO. 83:**

Identify each policy of insurance you have had since January 1, 2014, and state the name of each carrier, policy number, term and current cash value.

RESPONSE:

ATTACHED

**INTERROGATORY NO. 84:**

Identify each policy of insurance your spouse or domestic partner has had in the past five (5) years, and state the name of each carrier, policy number, term and current cash value.

RESPONSE:

NONE

**INTERROGATORY NO. 85:**

Identify any money owed or due to you from any governmental agency, and state the name of the entity from which you are entitled to this money, the amount owed or due, and the circumstances surrounding such entitlement.

RESPONSE:

NONE

**INTERROGATORY NO. 86:**

Identify any money owed or due to your spouse or domestic partner from any governmental

agency, and state the name of the entity from which your spouse or domestic partner is entitled to this money, the amount owed and due, and the circumstances surrounding such entitlement.

RESPONSE:

NONE

**INTERROGATORY NO. 87:**

Identify each financial statement prepared or issued by you or on your behalf since January 1, 2014; attach a copy of each such financial statement to your Answers of these Interrogatories or set forth the contents of such verbatim.

RESPONSE:

ATTACHED

**INTERROGATORY NO. 88:**

Identify each financial statement prepared or issued by your spouse or domestic partner or on their behalf since January 1, 2014; attach a copy of each such financial statement to your Answers of these Interrogatories or set forth the contents of such verbatim.

RESPONSE:

NONE

**INTERROGATORY NO. 89:**

Set forth verbatim the contents of your income tax returns for years 2014 – 2018, inclusive, or

attach a photocopy of each such return.

RESPONSE:

OK.  
ATTACHED

**INTERROGATORY NO. 90:**

Set forth verbatim the contents of your spouse or domestic partner's income tax returns for years 2014 – 2018, inclusive, or attach a photocopy of each such return.

RESPONSE:

NONE

**INTERROGATORY NO. 91:**

If since January 1, 2014 any of your accounts receivable or other assets valued at more than \$100.00 have been assigned or conveyed to another person or entity, please identify the account or item assigned, date of assignment, the name and address of each assignee and the consideration received therefor.

RESPONSE:

NONE

**INTERROGATORY NO. 92:**

If since January 1, 2014 any of your spouse or domestic partner's accounts receivable or other assets valued at more than \$100.00 have been assigned or conveyed to another person or entity,

please identify the account or item assigned, date of assignment, the name and address of each assignee and the consideration received therefor.

RESPONSE:

NONE

**INTERROGATORY NO. 93:**

If since January 1, 2014, you have been a beneficiary of, or contributed to, any trust, identify the trust, and state: when the trust was created, the name and address of each trustee and beneficiary, and the property contributed to the trust.

RESPONSE:

NONE

**INTERROGATORY NO. 94:**

If since January 1, 2014, your spouse or domestic partner has been a beneficiary of, or contributed to, any trust, identify the trust, and state: when the trust was created, the name and address of each trustee and beneficiary, and the property contributed to the trust.

RESPONSE:

NONE

**INTERROGATORY NO. 95:**

If you are a beneficiary under the terms of the Will of any person now deceased, identify the

decedent and identify the state, court, and proceeding concerning the administration of the decedent's estate.

RESPONSE:

NONE

**INTERROGATORY NO. 96:**

If your spouse or domestic partner is a beneficiary under the terms of the Will of any person now deceased, identify the decedent, and identify the state, court, and proceedings concerning the administration of the decedent's estate.

RESPONSE:

NONE

**INTERROGATORY NO. 97:**

If you have received any property or money by way of inheritance, identify the decedent and the court having jurisdiction the decedent's estate, and identify any distribution made to you.

RESPONSE:

NONE

**INTERROGATORY NO. 98:**

If your spouse or domestic partner has received any property or money by way of inheritance, identify the decedent and the court having jurisdiction of the decedent's estate, and identify any

distribution made to your spouse or domestic partner.

**RESPONSE:**

NONE

**INTERROGATORY NO. 99:**

If, since January 1, 2014, you have entered into any transaction with your spouse or domestic partner or any other relative or other person involving the transfer of any of your real or personal property, identify the transaction and the property transferred, and state the consideration paid/received for such property, if any.

**RESPONSE:**

NONE

**INTERROGATORY NO. 100:**

If, since January 1, 2014, your spouse or domestic partner has entered into any transaction with any other relative or other person involving the transfer of any of your spouse or domestic partner's real or personal property, identify the transaction and the property transferred, and state the consideration paid/received for such property, if any.

**RESPONSE:**

NONE

**INTERROGATORY NO. 101:**

If since January 1, 2014 you have received a court settlement or judgment in your behalf, or have lawsuits pending, identify each by court and cause number, giving the amount sued for and the amount received, if any; if the suit is pending, state the status thereof.

RESPONSE:

ROPAL ENTERTAINMENT.  
CAUSE NO DC 18-09276

**INTERROGATORY NO. 102:**

If since January 1, 2014 your spouse or domestic partner has ever received a court settlement or judgment on their behalf, or have lawsuits pending, identify each by court and cause number, giving the amount sued for and the amount received, if any; if the suit is pending, state the status thereof.

RESPONSE:

NONE

**INTERROGATORY NO. 103:**

Identify your spouse, and any former spouses.

RESPONSE:

JAMELA SIDDIQI  
EX WIFE (DIVORCE)

**INTERROGATORY NO. 104:**

Identify each of your children.

RESPONSE:

**INTERROGATORY NO. 105:**

Identify your parents.

RESPONSE:

MUBIN SIDDIQI  
RAJIA SIDDIQI

**INTERROGATORY NO. 106:**

Identify Hiba Entertainment, Inc. and each and every person associated with Hiba Entertainment, Inc. (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

RESPONSE:

ONLY MY SELF

**INTERROGATORY NO. 107:**

Identify Tasacom Technologies, Inc. and each and every person associated with Tasacom Technologies, Inc. (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 37**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas



**RESPONSE:**

*I DONT KNOW*

**INTERROGATORY NO. 108:**

Identify Molabs Media, LLC and each and every person associated with Molabs Media, LLC (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**RESPONSE:**

*MOLABS MEDIA, LLC  
MOHAMMAD ABBAS  
OWNERS*

**INTERROGATORY NO. 109:**

Identify EK Nazar and each and every person associated with EK Nazar (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**RESPONSE:**

*I DONT KNOW*

**INTERROGATORY NO. 110:**

Identify Ticket Hungama and each and every person associated with Ticket Hungama (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**RESPONSE:**

I DON'T KNOW

**INTERROGATORY NO. 111:**

Identify Mera Box Office and each and every person associated with Ticket Hungama (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**RESPONSE:**

NERA BOX OFFICE -  
AJAY MITAL  
OWNER

**INTERROGATORY NO. 112:**

Identify Sulekha and Sulekha.com and each and every person associated with Sulekha and Sulekha.com, (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**RESPONSE:**

DON'T KNOW

**INTERROGATORY NO. 113:**

Identify Mera Ticket and each and every person associated with Mera Ticket, (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

**POST-JUDGMENT INTERROGATORIES TO MOHAMMAD NASIR SIDDIQI - 39**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

RESPONSE:

I DONT KNOW

**INTERROGATORY NO. 114:**

Identify Az & Hiba Entertainment and each and every person associated with Az & Hiba Entertainment (including, but not limited to, owners, investors, directors, officers, employees, agents, and representatives) with whom you have had any contact since January 1, 2014.

RESPONSE:

I DONT KNOW

**INTERROGATORY NO. 115:**

Identify Hussain Ajani and fully describe your relationship with this person.

RESPONSE:

Friend

**INTERROGATORY NO. 116:**

Identify Mohammad Abbas and fully describe your relationship with this person.

RESPONSE:

Friend & EX PARTNER.

**INTERROGATORY NO. 117:**

Identify Ajay Mittal and fully describe your relationship with this person.

RESPONSE:

Friend & EX PARTNER

**INTERROGATORY NO. 118:**

Identify Surinder Massey and fully describe your relationship with this person.

RESPONSE:

I DONT KNOW HIM

**INTERROGATORY NO. 119:**

Identify Shreyans Jain and fully describe your relationship with this person.

RESPONSE:

DONT have ANY Relationship  
OR ~~for~~ anything

**INTERROGATORY NO. 120:**

Identify each music, concert, entertainment, or similar event in which you have had any participation, whether as owner, producer, organizer, investor, director, officer, employee, contractor, agent, or representative, from January 1, 2014 to the present.

NONE

RESPONSE: AJIT SINGH  
ATUL ARORA  
SACHIN K. HAN  
RANAT K. HAN

**INTERROGATORY NO. 121:**

Identify each person employed by or in any way representing or associated with American Airlines Center or Center Operating Company with whom you have had any contact from January 15, 2014, to the present.

RESPONSE:

NONE

**INTERROGATORY NO. 122:**

Identify each person employed by or in any way representing or associated with Curtis Culwell Center with whom you have had any contact from January 15, 2014, to the present.

RESPONSE:

NONE

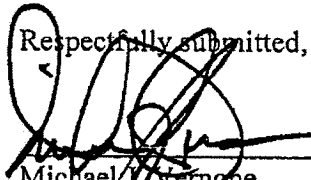
**INTERROGATORY NO. 123:**

Identify each person or entity who has invested or sponsored in any way any music, concert, entertainment, or other event with which you have been associated as an owner, producer, organizer, investor, employee, director, officer, agent, or representative, from January 1, 2014, to the present.

SPONSORED (TARA ENERGY)  
INVESTMENT (MOHAMMAD ARBABI)  
(AJAY MITTAL)

**RESPONSE:**

Respectfully submitted,

  
\_\_\_\_\_  
Michael J. Vernone  
State Bar No. 20553400

NEEDHAM ☐ VERNONE  
1412 Main Street, Suite 1400  
Dallas, Texas 75202  
Telephone: (214) 741-7447  
Facsimile: (214) 761-1910

ATTORNEYS FOR PLAINTIFF  
ROPAL ENTERTAINMENT, INC.

**Certificate of Service**

The undersigned certifies that this document was served in accordance with the Texas Rules of Civil Procedure on April 12, 2019.

  
\_\_\_\_\_  
Michael J. Vernone

Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**POST-JUDGMENT REQUEST FOR  
PRODUCTION OF DOCUMENTS TO  
MOHAMMAD NASIR SIDDIQI**

TO: Mohammad Nasir Siddiqi, *pro se*, 14411 Tanglewood Drive, Farmers Branch, Texas 75234.

Pursuant to Texas Rules for Civil Procedure 196 and 621a, Ropal Entertainment ("Ropal"), Plaintiff, serves this Post-Judgment Request for Production of Documents on Mohammad Nasir Siddiqi ("Siddiqi"), Defendant, and requests Siddiqi produce for inspection, copying, and reproduction the documents hereinafter designated. Siddiqi is required to serve a written response on Ropal within thirty (30) days after the service of the request. Ropal requests that the documents be produced in the offices of Needham Vernone, 1412 Main Street, Suite 1400, Dallas, Texas 75202, or at such other time and place as may be agreed upon by the parties.

**Definitions**

1. "Document" as used herein shall mean any kind of written, recorded, or graphic matter however produced or reproduced, of any kind or description, whether sent or received or

neither, including originals, non-identical copies (whether different from the originals because of marginal notes, or other material inserted therein or attached thereto, or otherwise), and drafts and both sides thereof, including, but not limited to: papers; books; letters; correspondence; telegrams; cables; telex messages; memoranda; notes; notations; work papers; transcripts; minutes; reports and recordings of telephone or other conversations, or other interviews, or conferences or other meetings; affidavits; pleadings; summaries; opinions; reports; stays; analyses; evaluations; contracts; agreements; ledgers; journals; statistical records; desk calendars; appointment books; diaries; lists; tabulations; sound recordings; computer print-outs; data processing records; microfilm; photographs; maps; charts; all records kept by electronic, photographic, or mechanical means; and all other things similar to any of the foregoing, however denominated.

2. "Persons" shall mean and include individuals and every type of entity, whether formed for business purposes or not.

3. "You", "Your" or "Siddiqi" shall mean and include Mohammad Nasir Siddiqi, his attorneys, agents or other persons or entities acting or purporting to act on his behalf.

4. "Ropal" refers to Ropal Entertainment LLC.

#### **Instructions**

1. You are instructed to produce any and all documents which are in your possession, custody or control. Possession, custody or control includes constructive possession whereby you have the right to compel the production of a document from a third party (including any agency, authority or representative).



2. To the extent the location of any document called for by this request is unknown to you, so state. If an estimate can reasonably be made as to the location of such a document, describe the document with sufficient particularity so that it can be identified, set forth your best estimate of the document's location, and describe the basis upon which the estimate is made.

3. If any document requested herein is withheld on the basis of any claim of privilege or any other ground, such document shall be identified by a written statement naming the name and position or title of the person who prepared or authored the document and, if applicable, the name and position or title of the person to whom the document was sent or shown; furthermore, specify the date on which the document was prepared or transmitted; identify the subject matter of the document; describe the nature of the document (e.g., letter, telegram); specify the number of pages, attachments or appendices, all persons to whom the document was distributed, including those who received indicated or blind copies; and specify the exact basis for your claim that such document need not be disclosed with such specificity as will permit the Court to determine the legal sufficiency of your objection or position; identify the paragraphs of this request to which the document relates; and the identity of the present custodian.

4. If any document requested has been lost or destroyed, such document shall be identified by a written statement naming the name and position or title of the person who prepared or authored the document and, if applicable, the name and position or title of the person to whom the document was sent or shown; furthermore, specify the date on which the document was prepared or transmitted; identify the subject matter of the document; describe the nature of the document (e.g., letter, telegram); specify the number of pages, attachments or appendices, all

persons to whom the document was distributed, including those who received indicated or blind copies; and specify the exact basis for your claim that such document need not be disclosed with such specificity as will permit the Court to determine the legal sufficiency of your objection or position; identify the paragraphs of this request to which the document relates; and the identity of the present custodian.

**Documents to be Produced**

**REQUEST FOR PRODUCTION NO. 1:**

All bank statements, cancelled checks, deposit slips and check registers from any and all bank accounts in which you have or have had an ownership interest or signatory authority in from January 1, 2014, through the present, whether said accounts are now open or closed.

**RESPONSE:**

*Requested from Bank.  
They will email to me next  
week - OK - S*

**REQUEST FOR PRODUCTION NO. 2:**

All bank statements, cancelled checks, deposit slips and check registers from any and all bank accounts in which your spouse or domestic partner has or had an ownership interest or signatory authority in from January 1, 2014, through the present, whether said accounts are now open or closed.

**RESPONSE:**

*NONE*

**REQUEST FOR PRODUCTION NO. 3:**

All insurance policies of every kind and nature, including but not limited to life, homeowner, business and auto (with all schedules, riders, supplements and endorsements), on which you paid any premium from January 1, 2014 to the present or of which you are the owner or beneficiary of

**POST JUDGMENT REQUEST FOR PRODUCTION TO MOHAMMAD NASIR SIDDIQI - 5**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas*

the policy.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 4:**

All insurance policies of every kind and nature, including but not limited to life, homeowner, business and auto (with all schedules, riders, supplements and endorsements), on which your spouse or domestic partner paid any premium from January 1, 2014 to the present, or of which your spouse or domestic partner is the owner or beneficiary of the policy.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 5:**

All United States Income Tax returns filed by you, including related work sheets, information returns and declarations of estimated tax, for the tax years, 2014 through 2018, inclusive.

**RESPONSE:**

I will FAX to you  
Next week  
2014 to 2018

**REQUEST FOR PRODUCTION NO. 6:**

All United States Income Tax returns filed by your spouse or domestic partner, including related work sheets, information returns and declarations of estimated tax, for the tax years, 2014 through

NONE

**POST JUDGMENT REQUEST FOR PRODUCTION TO MOHAMMAD NASIR SIDDIQI - 6**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

2018, inclusive.

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 7:**

All deeds and documents of title for all real estate in which you have any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 8:**

All deeds and documents of title for all real estate in which your spouse or domestic partner has any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 9:**

All certificates of common or preferred capital stock, membership interest, partnership interest, or other security in any corporation, limited liability company, limited liability partnership, limited partnership, mutual fund, bond fund or investment trust in which you own any legal or equitable interest.

NONE

**POST JUDGMENT REQUEST FOR PRODUCTION TO MOHAMMAD NASIR SIDDIQI - 7**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 10:**

All certificates of common or preferred capital stock, membership interest, partnership interest or other security in any corporation, limited liability company, limited liability partnership, limited partnership, mutual fund, bond fund or investment trust in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

*None*

**REQUEST FOR PRODUCTION NO. 11:**

All appraisals done from January 1, 2014 to the present on any real or personal property in which you own or have owned any legal or equitable interest.

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 12:**

All appraisals done from January 1, 2014 to the present on any real or personal property in which your spouse or domestic partner owns or has owned any legal or equitable interest.

*None*

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 13:**

All leases of real or personal property or other executory contracts of whatever kind or nature to which you are a party or in which you have any current or future legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 14:**

All leases of real or personal property or other executory contracts of whatever kind or nature to which your spouse or domestic partner is a party or in which your spouse or domestic partner has any current or future legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 15:**

All notes, security documents, guaranties and any other documents evidencing any indebtedness, including charge and credit accounts, owed by you to any person or entity.

NONE

**POST JUDGMENT REQUEST FOR PRODUCTION TO MOHAMMAD NASIR SIDDIQI - 9**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 16:**

All notes, security documents, guaranties and any other documents evidencing any indebtedness, including charge and credit accounts, owed by your spouse or domestic partner to any person or entity.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 17:**

All notes, security documents, guaranties, and any other documents evidencing any indebtedness owed to you by any person or entity, including, but not limited to, credit or charge card clearing houses, PayPal, Venmo, eBay, Craigslist and Amazon.

**RESPONSE:**

AMERICAN EXPRESS  
DISCOVER  
CHASE

**REQUEST FOR PRODUCTION NO. 18:**

All notes, security documents, guaranties, and any other documents evidencing any indebtedness owed to your spouse or domestic partner by any person or entity, including, but not limited to, credit or charge card clearing houses, PayPal, Venmo, eBay, Craigslist and Amazon.



**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 19:**

All financial statements prepared or issued by you or on your behalf to any entity, including any financial institution, from January 1, 2014 to the present.

NONE

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 20:**

All financial statements prepared or issued by your spouse or domestic partner, or on their behalf, to any entity, including any financial institution, from January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 21:**

All statements of all stock brokerage or other investment or retirement accounts in which you own or have owned a legal or equitable interest or to which you have made any contribution from January 1, 2014 to the present.

NONE

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 22:**

All statements of all stock brokerage or other investment or retirement accounts in which your spouse or domestic partner owns or has owned a legal or equitable interest or to which they have made any contribution from January 1, 2014 to the present.

**RESPONSE:**

*None*

**REQUEST FOR PRODUCTION NO. 23:**

All financial statements, including balance sheets, profit and loss statements and statements of changes in financial position, prepared or issued since January 1, 2014, by or on behalf of any business in which you own or have owned any legal or equitable interest.

**RESPONSE:**

*OK.*

**REQUEST FOR PRODUCTION NO. 24:**

All financial statements, including balance sheets, profit and loss statements and statements of changes in financial position, prepared or issued since January 1, 2014, by or on behalf of any business in which your spouse or domestic partner owns or has owned any legal or equitable

interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 25:**

All limited liability company certificates of organization, agreements and regulations, limited liability partnership certificates of organization, agreements and regulations, joint venture agreements, limited partnership agreements, certificates of organization of limited partnership, and general partnership agreements executed by you, or relating to any entity in which you own or have owned any legal or equitable interest from January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 26:**

All limited liability company certificates of organization, agreements and regulations, limited liability partnership certificates of organization, agreements and regulations, joint venture agreements, limited partnership agreements, certificates of organization of limited partnership, and general partnership agreements executed by your spouse or domestic partner, or relating to any entity in which your spouse or domestic partner owns or has owned any legal or equitable interest from January 1, 2014 to the present.

NONE

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 27:**

All certificates of title, licenses, or registration documents for any motorcycles, automobiles, trucks, cabs, motor homes, mobile homes, boats, airplanes, and livestock naming you as owner, operator or lien holder.

REGISTRATION DOCUMENTS.

**RESPONSE:**

CHEVY TRUCK

**REQUEST FOR PRODUCTION NO. 28:**

All certificates of title, licenses, or registration documents for any motorcycles, automobiles, trucks, cabs, motor homes, mobile homes, boats, airplanes, and livestock naming your spouse or domestic partner as owner, operator or lien holder.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 29:**

All United States Gift Tax returns filed by you or on your behalf from January 1, 2014 to the present.

NONE

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 30:**

All United States Gift Tax returns filed by your spouse or domestic partner, or on their behalf, from January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 31:**

Any Last Will and Testament and all Codicils related thereto executed by you.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 32:**

Any Last Will and Testament and all Codicils related thereto executed by your spouse or domestic partner.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 33:**

All documents, including photographs, illustrations and appraisals, relating to each piece of jewelry or watch, having a value of \$100.00 or greater, in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 34:**

All documents, including photographs, illustrations and appraisals, relating to each piece of jewelry or watch, having a value of \$100.00 or greater, in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 35:**

All documents, including photographs, illustrations and appraisals, relating to precious or semiprecious stone having a value in excess of \$100.00 in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 36:**

All documents, including photographs, illustrations and appraisals, relating to precious or semiprecious stone having a value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

*None*

**REQUEST FOR PRODUCTION NO. 37:**

All documents, including photographs, illustrations and appraisals, relating to each item consisting of precious metals of any sort, and whether in raw, cast or jewelry form, having a value of greater than \$100.00 (whether singularly or collectively as in the case of coins, ingots, or other collections), in which you own any legal or equitable interest.

**RESPONSE:**

*None*

**REQUEST FOR PRODUCTION NO. 38:**

All documents, including photographs, illustrations and appraisals, relating to each item consisting of precious metals of any sort, and whether in raw, cast or jewelry form, having a value of greater than \$100.00 (whether singularly or collectively as in the case of coins, ingots, or other collections), in which your spouse or domestic partner owns any legal or equitable interest.

*None*

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 39:**

All documents, including photographs, illustrations and appraisals, relating to each work of art (painting, sculpture, lithograph, serigraph, or other) having a value of greater than \$100.00 in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 40:**

All documents, including photographs, illustrations and appraisals, relating to each work of art (painting, sculpture, lithograph, serigraph, or other) having a value of greater than \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 41:**

All documents, including photographs, illustrations and appraisals, relating to clothing having original purchase price or fair market value in excess of \$100.00 in which you own any legal or equitable interest.

NONE



**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 42:**

All documents, including photographs, illustrations and appraisals, relating to clothing having original purchase price or fair market value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 43:**

All documents, including photographs, illustrations and appraisals, relating to each electrical appliance, including, but not limited to, computers and related equipment, telephones, cell phones, etc., having an original purchase price or original fair market value in excess of \$100.00 in which you own any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 44:**

All documents, including photographs, illustrations and appraisals, relating to each electrical appliance, including, but not limited to, computers and related equipment, telephones, cell phones,

etc., having an original purchase price or original fair market value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 45:**

Each driver's license or government issued identification card or document which you have held since January 1, 2009.

**RESPONSE:**

ONLY TXDL LIC

**REQUEST FOR PRODUCTION NO. 46:**

Your United States Social Security Card, and your spouse's or domestic partner's United States Social Security Card.

**RESPONSE:**

ATTACHED

**REQUEST FOR PRODUCTION NO. 47:**

All documents relating to ownership, lease or rental of each location of residence or business maintained by you for a period of more than one month from January 1, 2014 through the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 48:**

All documents relating to ownership, lease or rental of each location of residence or business maintained by your spouse or domestic partner for a period of more than one month for from January 1, 2014 through the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 49:**

All documents evidencing or relating to all wages or compensation, or any other income received by you, including Forms W-2, Forms 1099 or other statements of amounts paid or taxes withheld, for the period January 1, 2014 to present.

**RESPONSE:**

ATTACHED

**REQUEST FOR PRODUCTION NO. 50:**

All documents evidencing or relating to all wages or compensation, or any other income received by your spouse or domestic partner, including Forms W-2, Forms 1099 or other statements of amounts paid or taxes withheld, for the period January 1, 2014 to present.

**RESPONSE:**

~~Answer~~  
NONE

**REQUEST FOR PRODUCTION NO. 51:**

All documents evidencing or identifying the name, address and telephone number of each person or entity having possession of any item of real or personal property in which you own a legal or beneficial interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 52:**

All documents evidencing or identifying the name, address and telephone number of each person or entity having possession of any item of real or personal property in which your spouse or domestic partner owns a legal or beneficial interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 53:**

All documents identifying or relating to each safety deposit box, safe or vault in which is located any personal property in which you own any legal or equitable interest, and/or identify or relating to the contents of such safety deposit box, safe, or vault.

**RESPONSE:**

*SAFE BOX*

**REQUEST FOR PRODUCTION NO. 54:**

All documents identifying or relating to each safety deposit box, safe or vault in which is located any personal property in which your spouse or domestic partner owns any legal or equitable interest, and/or identify or relating to the contents of such safety deposit box, safe, or vault.

**RESPONSE:**

*NONE*

**REQUEST FOR PRODUCTION NO. 55:**

Your Birth Certificate, all passports, and any and all papers, permits or documents which authorize your presence and/or residence within the United States of America, or any other country.

**RESPONSE:**

*I DONT HAVE a Birth certificate  
PASSPORT ATTACHED*

**REQUEST FOR PRODUCTION NO. 56:**

The Birth Certificate, all passports, and any and all papers, permits or documents which authorize your spouse or domestic partner's presence and/or residence within the United States of America, or any other country.

*NONE*

**RESPONSE:**

**REQUEST FOR PRODUCTION NO. 57:**

All documents evidencing or relating to any claim of copyright, patent, trademark, trade name or other intellectual property, whether registered or not, in which you own or have owned any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 58:**

All documents evidencing or relating to any claim of copyright, patent, trademark, trade name or other intellectual property, whether registered or not, in which your spouse or domestic partner owns or has any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 59:**

All documents evidencing or relating to any book, manuscript, article or any other expression in written or spoken word, whether published or not, in which you own or have any legal or equitable interest.

NONE

**POST JUDGMENT REQUEST FOR PRODUCTION TO MOHAMMAD NASIR SIDDIQI - 24**

*Ropal Entertainment, LLC, v. Hiba Entertainment, Inc., et al*; Cause No. DC-18-09276; 193<sup>rd</sup> Judicial District Court, Dallas County, Texas

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 60:**

All documents evidencing or relating to any book, manuscript, article or any other expression in written or spoken word, whether published or not, in which your spouse or domestic partner owns or has any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 61:**

All documents, including any photographs, illustrations and appraisals, evidencing or relating to any other tangible or intangible personal property having an original purchase price of a fair market value in excess of \$100.00 in which you own any legal or equitable interest not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 62:**

All documents, including any photographs, illustrations and appraisals, evidencing or relating to any other tangible or intangible personal property having an original purchase price of a fair market

value in excess of \$100.00 in which your spouse or domestic partner owns any legal or equitable interest not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 63:**

All documents evidencing or relating to any income or compensation, whether monetary, in-kind, or otherwise, received by you from January 1, 2014, to the present not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 64:**

All documents evidencing or relating to any income or compensation, whether monetary, in-kind, or otherwise, received by your spouse or domestic partner from January 1, 2014, to the present not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 65:**

All documents evidencing or relating to any amount of money or property owed to you by any



person or entity not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 66:**

All documents evidencing or relating to any amount of money or property owed to your spouse or domestic partner by any person or entity not produced in response to any other Request for Production.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 67:**

All documents identifying or relating to any client, customer or contractor of yours or a business owned or controlled by you for the period of January 1, 2014 to the present, including all documents evidencing any amounts paid and all amounts owed by such persons to you or the business.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 68:**

All documents identifying or relating to any client, customer or contractor of your spouse or

domestic partner or a business owned or controlled by your spouse or domestic partner for the period of January 1, 2014 to the present, including all documents evidencing any amounts paid and all amounts owed by such persons to your spouse or domestic partner or the business.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 69:**

All documents identifying or relating to any account with PayPal, Venmo, eBay, Craigslist, Amazon or any online seller or purchaser of goods or services, or account with any credit card clearing house in which you own any legal or equitable interest.

**RESPONSE:**

YES

**REQUEST FOR PRODUCTION NO. 70:**

All documents identifying or relating to any account with PayPal, Venmo, eBay, Craigslist, Amazon or any online seller or purchaser of goods or services, or account with any credit card clearing house in which your spouse or domestic partner owns any legal or equitable interest.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 71:**

All documents identifying or relating to any income received by you from any source for the period January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 72:**

All documents identifying or relating to any income received by your spouse or domestic partner from any source for the period January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 73:**

All documents identifying or relating to any asset with a fair market value of \$100.00 or more which you have sold, given away or otherwise conveyed to any other person or entity from January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 74:**

All documents identifying or relating to any asset with a fair market value of \$100.00 or more

which your spouse or domestic partner has sold, given away or otherwise conveyed to any other person or entity from January 1, 2014 to the present.

**RESPONSE:**

NONE

**REQUEST FOR PRODUCTION NO. 75:**

All documents evidencing or relating to any governmental report or filing prepared and filed by you or on your behalf with any federal, state, or local authority, including but not limited to franchise tax, sales tax, employment tax reports.

**RESPONSE:**

ATTACHED

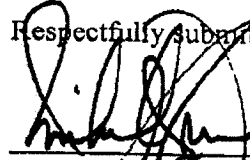
**REQUEST FOR PRODUCTION NO. 76:**

All documents evidencing or relating to any governmental report or filing prepared and filed by your spouse or domestic partner or on their behalf with any federal, state, or local authority, including but not limited to franchise tax, sales tax, employment tax reports.

**RESPONSE:**

NONE

Respectfully submitted,



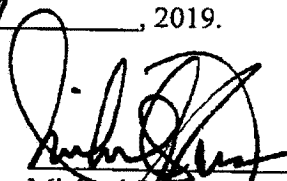
Michael J. Vernone  
State Bar No. 20553400

NEEDHAM □ VERNONE  
1412 Main Street, Suite 1400  
Dallas, Texas 75202  
Telephone: (214) 741-7447  
Facsimile: (214) 761-1910

ATTORNEY FOR PLAINTIFF  
ROPAL ENTERTAINMENT LLC

**Certificate of Service**

The undersigned certifies a copy of this document was served in accordance with the Texas Rules of Civil Procedure on April 11, 2019.



Michael J. Vernone

Cause No. DC-18-09276

ROPAL ENTERTAINMENT, LLC,	§	IN THE DISTRICT COURT
	§	
Plaintiff,	§	
	§	
v.	§	
	§	
HIBA ENTERTAINMENT, INC,	§	DALLAS COUNTY, TEXAS
MOHAMMAD NASIR SIDDIQI, and	§	
AZHAR QASMI,	§	
	§	
Defendants.	§	193 <sup>rd</sup> JUDICIAL DISTRICT

**ORDER OF CONTEMPT AGAINST  
HIBA ENTERTAINMENT, INC.**

On this day the Court held a hearing on the Motion for Contempt filed by Plaintiff Ropal Entertainment, Inc. ("Ropal"), against Defendant Hiba Entertainment, Inc. ("Hiba"). Ropal appeared through its counsel of record and Hiba did/did not appeared through its Registered Agent. The court cautioned Hiba as to its right to counsel. Upon consideration of the evidence and the arguments of counsel and Hiba, the Court finds that Hiba has willfully failed to answer post-judgment discovery as required by the Texas Rules of Procedure, and further, has willfully failed to comply with this Court's Order Granting Motion to Compel and for Sanctions, dated June 13, 2019, which required Hiba to answer discovery and pay sanctions in the amount of \$1,000.00 on or before June 23, 2019. Hiba's failure to provide written responses to discovery and failure to pay sanctions as ordered by this Court constitute acts of contempt of the Court. The Court finds that Hiba must be held in contempt so as to secure its compliance with the Orders of the Court and the Texas Rules of Civil Procedure.

IT IS THEREFORE ORDERED that Hiba be and is hereby fined in the amount of \$100.00;

IT IS FURTHER ORDERED that Hiba must pay counsel for Ropal an additional \$1,500.00

in sanctions necessitated to reimburse Ropal for the bringing of the Motion for Contempt;

*Hiba has until October 26 by 5:00 pm to comply with this order.*

~~IT IS FURTHER ORDERED that Hiba shall be incarcerated in the county jail until such time as he fully complies with the Court's Order Granting Motion to Compel and for Sanctions, dated June 13, 2019, by fully answering the discovery requests previously propounded upon him and by paying sanctions in the amount of \$1,000.00; and by paying Ropal's counsel additional sanctions in the amount of \$1,500.00 as worded hereinabove.~~

Signed, this October 17, 2019.

  
\_\_\_\_\_  
Honorable Judge Presiding

**13.**

**EAGLE PROTECTIVE  
GROUP 2019 FIND  
REPORT**



2:46 PM

12/10/19

Accrual Basis

**Eagle Protective Group, Inc.**

**Find Report**

**All Transactions**

Type	Date	Num	Name	Memo	Account	Clr	Split	Amount	Balance
Check	12/04/2019	Debit	TD Auto Finance	Octob...	Chase New Account...		Automobile	-1,159.42	-1,159.42
Check	09/18/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-579.71	-1,739.13
Check	09/03/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-1,188.41	-2,927.54
Check	06/24/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-579.71	-3,507.25
Check	05/30/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-579.71	-4,086.96
Check	04/23/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-579.71	-4,666.67
Check	04/10/2019	Debit	TD Auto Finance		Chase New Account...	X	Automobile	-608.70	-5,275.37
<b>Total</b>								<b>-5,275.37</b>	<b>-5,275.37</b>

**14.**

**DISCOVER  
STATEMENTS**

**DISCOVER**

Discover® More® Card

Account number ending in 3190

Open Date: Jun 6, 2018- Close Date: Jul 5, 2018

Cardmember Since 2008

Page 1 of 6

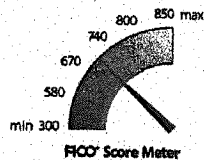
**ACCOUNT SUMMARY**

Previous Balance		\$16,866.03
Payments and Credits	-	\$1,963.41
Purchases	+	\$1,926.82
Balance Transfers	+	\$0.00
Cash Advances	+	\$0.00
Fees Charged	+	\$0.00
Interest Charged	+	\$167.67
<b>New Balance</b>		<b>\$16,997.11</b>

See Interest Charge Calculation section following the Transactions section for detailed APR information

Credit Line	\$22,000
Credit Line Available	\$5,002
Cash Advance Credit Line	\$2,500
Cash Advance Credit Line Available	\$2,500

You may be able to avoid interest on Purchases. See reverse for details.

**FICO**  
**697**

Your FICO® Credit Score on 6/29/18

Track recent scores on the FICO page in this statement

Thank you for your continued enrollment in DirectPay automatic payments. Your next automatic payment of \$1,000.00 will be on July 16, 2018. See "Information For You" section for additional details.

**PAYMENT INFORMATION****New Balance** **\$16,997.11**Minimum Payment Due **\$340.00**  
Payment Due Date **August 4, 2018****Late Payment Warning:** If we do not receive your minimum payment by the date listed above, you may have to pay a late fee of up to \$37.00 and your purchase and balance transfer APRs for new transactions may be increased up to the Penalty APR of 17.99% variable.**Minimum Payment Warning:** If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	26 years	\$35,874
\$573	3 years	\$20,614 (Savings= \$15,260)

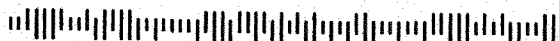
If you would like information about credit counseling services, call 1-800-347-1121.

**REWARDS****Cashback Bonus®**Anniversary Month  
October

Opening Balance	\$	235.12
New Cashback Bonus This Period		
Everywhere Else	+	\$ 5.55
Redeemed This Period	-	\$ 0.00

**Cashback Bonus Balance** **\$ 240.67**To learn more, log in at [Discover.com](http://Discover.com)**NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION**Make Check payable to Discover. Do Not Send Cash.  
Please fold on the perforation below, detach and return with your payment.**Payment Coupon**

Please do not fold, clip or staple.

**Pay Online**  
Discover.com**Pay by Phone**  
1-800-347-2683

000004500 01 AV 0.375 T4 05 SDS5RA01 21

MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412PAID  
ST

Account number ending in	3190
Minimum Payment Due	\$340.00
New Balance	\$16,997.11
Payment Due Date	August 4, 2018
Amount enclosed	\$

PO BOX 790213  
ST. LOUIS, MO 63179-0213Phone and Internet payments must be received by 5PM ET to be credited as of the same day.  
Address, e-mail or telephone changed? Note changes on reverse side.

000001986452612094614169971100375000034000

**DISCOVER**

Discover® More® Card

Account number ending in 3190

Open Date: Jun 6, 2018 - Close Date: Jul 5, 2018

Page 3 of 6

**CONTACT US**

**Web**  
Access your  
account securely  
at Discover.com



**Mobile**  
Manage your  
account anytime,  
anywhere at  
m.Discover.com



**Phone**  
1-800-DISCOVER  
(1-800-347-2683)  
TDD 1-800-347-7449



**Inquiry**  
Discover  
PO Box 30943  
Salt Lake City  
UT 84130



**Mail Payments**  
Discover  
PO Box 6103  
Carol Stream  
IL 60197-6103

**Transactions**

	Trans. Date	Post Date			
Payments and Credits	Jun 14	Jun 14	TRANSFER BALANCE	\$	-963.41
	Jun 16	Jun 16	DIRECTPAY FIXED PAYMENT		-1,000.00
Other/Miscellaneous	Jul 4	Jul 4	TRANSFER BALANCE	\$	963.41
	Jul 4	Jul 4	TRANSFER BALANCE		963.41
<b>Fees</b>			<b>TOTAL FEES FOR THIS PERIOD</b>	\$	0.00
Interest Charged			INTEREST CHARGE ON PURCHASES	\$	167.67
			INTEREST CHARGE ON CASH ADVANCES		0.00
			INTEREST CHARGE ON BALANCE TRANSFERS		0.00
			<b>TOTAL INTEREST FOR THIS PERIOD</b>		167.67

**2018 Totals Year-to-Date**

<b>TOTAL FEES CHARGED IN 2018</b>	\$	0.00
<b>TOTAL INTEREST CHARGED IN 2018</b>	\$	1,168.60

**Interest Charge Calculation**

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Current Billing Period: 30 days

TYPE OF BALANCE	ANNUAL PERCENTAGE RATE (APR)*	PROMO APR EXPIRATION DATE**	BALANCE SUBJECT TO INTEREST RATE	INTEREST CHARGE
Purchases	12.99% V	N/A	\$15,703.77	\$167.67
Cash Advances	25.74% V	N/A	\$0.00	\$0.00

V=Variable Rate

\* If your account is currently enrolled in a special program or is placed into one during the term of the offer, you will receive the benefit of the lower rate while the special program is in effect. This includes, if applicable, any lower rates as authorized under the Servicemembers Civil Relief Act.

\*\* This is the date your promotional rate expires and the remaining balance will be moved to your standard APR disclosed when you accepted the offer. Please note: Changing your payment due date may change your Promo APR Expiration Date.

\*\*\* For more information, please call us at 1-800-347-2683.

**Information For You**

Your next automatic fixed amount payment of \$1,000.00 will be on July 16, 2018. Any payments made prior to this date and any credits applied to your Account for the billing cycle reflected on this statement may lower your statement balance due and thus the scheduled DirectPay amount.

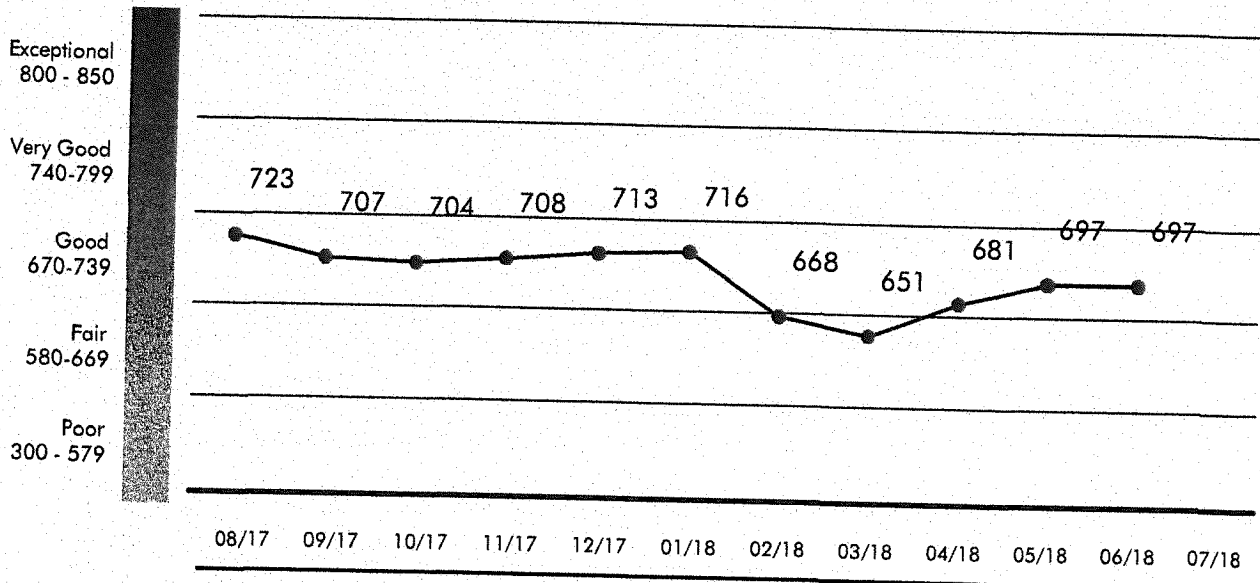
**DISCOVER****Discover® More® Card**

Account number ending in 3190

Open Date: Jun 6, 2018- Close Date: Jul 5, 2018

Cardmember Since 2008

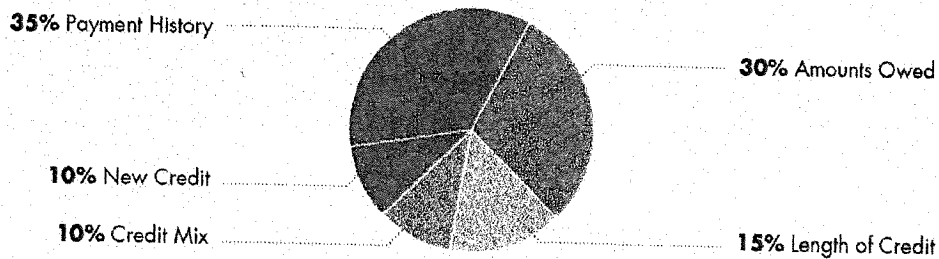
Page 5 of 6

**Muhammad, your FICO® Credit Score is 697 as of 06/29/2018****Good News! Your FICO® Credit Score indicates to lenders that you are a good borrower.****Your FICO® Credit Score History****Important Information:**

- We may not always receive a score for you each month, so there may be months with no scores.
- For questions on the availability of your score go to the "Information For You" section of this statement.

**This chart will be shown in every Jan, Apr, Jul and Oct statement when you have up to 12 months of scores. Log in to [Discover.com/FICO](https://www.discover.com/FICO) any time to see key factors that help explain your scores.**

FICO® Credit Scores consider the following for the general population:



See FICO® Credit Score Terms on the 'Information For You' section of this statement

**DISCOVER**

Discover® More® Card

Account number ending in 4813

Open Date: Jun 6, 2018- Close Date: Jul 5, 2018

Cardmember Since 2008

Page 1 of 4

**ACCOUNT SUMMARY**

Previous Balance		\$0.00
Payments and Credits	-	\$1,926.82
Purchases	+	\$1,926.82
Balance Transfers	+	\$0.00
Cash Advances	+	\$0.00
Fees Charged	+	\$0.00
Interest Charged	+	\$0.00
New Balance		\$0.00

See Interest Charge Calculation section following the Transactions section for detailed APR information

Credit Line	\$22,000
Credit Line Available	\$0
Cash Advance Credit Line	\$2,500
Cash Advance Credit Line Available	\$0

You may be able to avoid interest on Purchases. See reverse for details.

**Contact Us** Discover.com  
1-800-347-2683

**PAYMENT INFORMATION****New Balance** **\$0.00**

Minimum Payment Due \$0.00

Payment Due Date August 4, 2018

**Late Payment Warning:** If we do not receive your minimum payment by the date listed above, you may have to pay a late fee of up to \$37.00 and your purchase and balance transfer APRs for new transactions may be increased up to the Penalty APR of 17.99% variable.

**REWARDS****Cashback Bonus®** Anniversary Month

October

Opening Balance \$ 0.00

New Cashback Bonus This Period + \$ 0.00

Redeemed This Period - \$ 0.00

**Cashback Bonus Balance** **\$ 0.00**To learn more, log in at [Discover.com](http://Discover.com)**NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION**

Make Check payable to Discover. Do Not Send Cash.  
Please fold on the perforation below, detach and return with your payment.

**Payment Coupon**

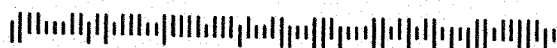
Please do not fold, clip or staple.

**Pay Online**

Discover.com

**Pay by Phone**

1-800-347-2683



000004479 01 AV 0.375 T3 05 SDS5RA01 21

MUHAMMAD N SIDDIQI  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412



Account number ending in	4813
Minimum Payment Due	\$0.00
New Balance	\$0.00
Payment Due Date	August 4, 2018
Amount enclosed	\$ <input type="text"/>

PO BOX 790213  
ST. LOUIS, MO 63179-0213

Phone and Internet payments must be received by 5PM ET to be credited as of the same day.  
Address, e-mail or telephone changed? Note changes on reverse side.

000001986452192168481000000000127930000000

**DISCOVER**

Discover® More® Card

Account number ending in 4813

Open Date: Jun 6, 2018 - Close Date: Jul 5, 2018

Page 3 of 4

**CONTACT US**

**Web**  
Access your  
account securely  
at [Discover.com](http://Discover.com)



**Mobile**  
Manage your  
account anytime,  
anywhere at  
[m.Discover.com](http://m.Discover.com)



**Phone**  
1-800-DISCOVER  
(1-800-347-2683)  
TDD 1-800-347-7449



**Inquiry**  
Discover  
PO Box 30943  
Salt Lake City  
UT 84130



**Mail Payments**  
Discover  
PO Box 6103  
Carol Stream  
IL 60197-6103

**Transactions**

	Trans. Date	Post Date			
Payments and Credits	Jul 4	Jul 4	TRANSFER BALANCE	\$	-963.41
	Jul 4	Jul 4	TRANSFER BALANCE		-963.41
Merchandise	Jan 17	Jun 8	LAMPS PLUS - 44 PLANO TX	\$	963.41
			REVERSAL OF TEMPORARY CREDIT		
Other/Miscellaneous	Jun 14	Jun 14	TRANSFER BALANCE	\$	963.41
<b>Fees</b>					
				<b>TOTAL FEES FOR THIS PERIOD</b>	\$ 0.00
<b>Interest Charged</b>					
				<b>TOTAL INTEREST FOR THIS PERIOD</b>	\$ 0.00

**2018 Totals Year-to-Date**

<b>TOTAL FEES CHARGED IN 2018</b>	\$	0.00
<b>TOTAL INTEREST CHARGED IN 2018</b>	\$	0.00

**Interest Charge Calculation**

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Current Billing Period: 30 days

TYPE OF BALANCE	ANNUAL PERCENTAGE RATE (APR)*	PROMO APR EXPIRATION DATE**	BALANCE SUBJECT TO INTEREST RATE	INTEREST CHARGE
Purchases	12.99% V	N/A	\$0.00	\$0.00
Cash Advances	25.74% V	N/A	\$0.00	\$0.00

V=Variable Rate

\* If your account is currently enrolled in a special program or is placed into one during the term of the offer, you will receive the benefit of the lower rate while the special program is in effect. This includes, if applicable, any lower rates as authorized under the Servicemembers Civil Relief Act.

\*\* This is the date your promotional rate expires and the remaining balance will be moved to your standard APR disclosed when you accepted the offer. Please note: Changing your payment due date may change your Promo APR Expiration Date.

\*\*\* For more information, please call us at 1-800-347-2683.

**Information For You****Availability of FICO® Credit Score**

As an active cardmember, you may see your FICO® Credit Score on your monthly statement or online. Reasons why you may not see your FICO® Credit Score include: if you opt out; if you have key information that is mismatched or missing, as one example, an address change that has not been updated with Discover or TransUnion®; if your credit history is too new; if your account status is abandoned, bankrupt, fraud, lost or stolen, closed, revoked, or charged off; if you have a foreign address. Your FICO® Score is disclosed on statements when your statement is available. You may not receive a statement if you have no account activity such as no purchase transactions, fees, interest, or payments for approximately 30 days.

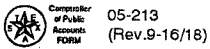
FICO is a registered trademark of the Fair Isaac Corporation in the United States and other countries.

**We are investigating your disputed transactions.** Credits will be issued for the disputed transactions while we conduct our investigation. Please submit your monthly payment for the undisputed amount.

**15.**

# **TEXAS FRANCHISE TAX**





# Texas Notice of Forfeiture of Registration

Date of notice 03/06/2020		Date of forfeiture 02/28/2020
Taxpayer name DFW INVESTIGATION & PROTECTION, INC.		Taxpayer number 32059409733
<p align="center"><b>Your entity's registration has been forfeited</b> because state records show the entity has failed to meet the franchise tax requirements shown below.</p> <p><b>Reason for Forfeiture:</b> Long Form, EZ, or No Tax Due Report, Not Filed Complete, Signed Public Information Report, Form 05-102, Not Filed</p> <p><b>REPORT YEAR:</b> 2019 ANNUAL</p>		



**Date of forfeiture:** The entity's right to transact business in Texas was forfeited on 09/27/2019 for failure to comply with franchise tax requirements prescribed by Texas franchise tax law. The Secretary of State has now advised this office that the registration was forfeited effective 02/28/2020 because its right to transact business was not revived as required by law. For more information call 1-800-252-7942.

**What you need to do to resolve the franchise tax delinquency:**

- Visit our website, [www.comptroller.texas.gov/taxes/franchise/notices.php](http://www.comptroller.texas.gov/taxes/franchise/notices.php), to find detailed information about the reason your entity's registration was forfeited (see "Reason for Forfeiture" above) and how to resolve it.
- Beginning with reports originally due after Sept. 30, 2011, a \$50 penalty will be assessed when a franchise tax report is filed late. The penalty will be assessed even if you subsequently file the report or whether any taxes are due. The \$50 penalty is due in addition to any other penalties assessed for the reporting period.
- If you received this notice and your entity is a member of a combined group, it may be that the reporting entity for the group failed to meet franchise tax requirements. The Texas registration for all members of the combined group will be forfeited unless the reporting entity meets franchise tax requirements. Please contact the reporting entity for your group to resolve the issue. (Tex. Tax Code Ann. Sec. 171.1014)

**What you need to do to reinstate the entity's registration:** See the back of this notice, "Want to Reinstate Your Registration?"

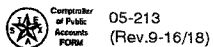
**Note to Texas companies:** If you do not reinstate the registration, the underlying organization may also be responsible for franchise tax if you continue to operate the business. **Most legal entities, except sole proprietorships and general partnerships owned directly and completely by natural persons, are subject to the franchise tax.** Submit a Texas Business Questionnaire, available at [www.comptroller.texas.gov/forms/ap-224.pdf](http://www.comptroller.texas.gov/forms/ap-224.pdf), so we can create a franchise tax account for the new entity, and any necessary permits can be issued in the name of the new entity.

**File and pay electronically using WebFile at**  
**[www.comptroller.texas.gov/taxes/file-pay/](http://www.comptroller.texas.gov/taxes/file-pay/).**

You will need the 6-digit XT number located at the top of this notice to access WebFile. You can use WebFile to file a franchise tax report or make a payment.

Franchise tax information, forms and instructions for filing are available online at  
**[www.comptroller.texas.gov/taxes/franchise/](http://www.comptroller.texas.gov/taxes/franchise/).**  
You can also contact the Comptroller's field office in your area or call 1-800-252-7942.

If you are not required to pay electronically, return the bottom portion of this notice with your payment.



## Texas Notice of Forfeiture of Registration

VVVV

b. ■



Do not write in the space above.

a. Type of tax/fee FRANCHISE TAX		c. Date of notice 03/06/2020	
Make your check payable to State Comptroller		Mail to: Comptroller of Public Accounts P.O. Box 149348 Austin, TX 78714-9348	
e. Taxpayer name and mailing address DFW INVESTIGATION & PROTECTION, INC. 3020 BIG TOWN BLVD MESQUITE TX 75150-2412			
f. Amount Paid \$			
*TC	*TP	*FP	*AM
13050	32059409733	19	0
		*FILE	
		0802376707	5 2

05-213  
 (Rev.9-16/18)

# Texas Notice of Forfeiture of Registration

Taxpayer name <b>HIBA ENTERTAINMENT INC.</b>		Date of notice <b>03/06/2020</b>	Date of forfeiture <b>02/28/2020</b>
Taxpayer number <b>32002130386</b>			

**Your entity's registration has been forfeited**  
*because state records show the entity has failed to meet the franchise tax requirements shown below.*

**Reason for Forfeiture:** Long Form, EZ, or No Tax Due Report, Not Filed  
 Complete, Signed Public Information Report, Form 05-102, Not Filed

**REPORT YEAR:** 2019 ANNUAL



**Date of forfeiture:** The entity's right to transact business in Texas was forfeited on 09/27/2019 for failure to comply with franchise tax requirements prescribed by Texas franchise tax law. The Secretary of State has now advised this office that the registration was forfeited effective 02/28/2020 because its right to transact business was not revived as required by law. For more information call 1-800-252-7942.

**What you need to do to resolve the franchise tax delinquency:**

- Visit our website, [www.comptroller.texas.gov/taxes/franchise/notices.php](http://www.comptroller.texas.gov/taxes/franchise/notices.php), to find detailed information about the reason your entity's registration was forfeited (see "Reason for Forfeiture" above) and how to resolve it.
- Beginning with reports originally due after Sept. 30, 2011, a \$50 penalty will be assessed when a franchise tax report is filed late. The penalty will be assessed even if you subsequently file the report or whether any taxes are due. The \$50 penalty is due in addition to any other penalties assessed for the reporting period.
- If you received this notice and your entity is a member of a combined group, it may be that the reporting entity for the group failed to meet franchise tax requirements. The Texas registration for all members of the combined group will be forfeited unless the reporting entity meets franchise tax requirements. Please contact the reporting entity for your group to resolve the issue. (Tex. Tax Code Ann. Sec. 171.1014)

**What you need to do to reinstate the entity's registration:** See the back of this notice, "Want to Reinstate Your Registration?"

**Note to Texas companies:** If you do not reinstate the registration, the underlying organization may also be responsible for franchise tax if you continue to operate the business. **Most legal entities, except sole proprietorships and general partnerships owned directly and completely by natural persons, are subject to the franchise tax.** Submit a Texas Business Questionnaire, available at [www.comptroller.texas.gov/forms/ap-224.pdf](http://www.comptroller.texas.gov/forms/ap-224.pdf), so we can create a franchise tax account for the new entity, and any necessary permits can be issued in the name of the new entity.

**File and pay electronically using WebFile at**  
**[www.comptroller.texas.gov/taxes/file-pay/](http://www.comptroller.texas.gov/taxes/file-pay/).**

You will need the 6-digit XT number located at the top of this notice to access WebFile. You can use WebFile to file a franchise tax report or make a payment.

Franchise tax information, forms and instructions for filing are available online at  
**[www.comptroller.texas.gov/taxes/franchise/](http://www.comptroller.texas.gov/taxes/franchise/).**  
 You can also contact the Comptroller's field office in your area or call 1-800-252-7942.

**If you are not required to pay electronically, return the bottom portion of this notice with your payment.**

05-213  
 (Rev.9-16/18)

VVVV

## Texas Notice of Forfeiture of Registration

b. ■



Do not write in the space above.

a. Type of tax/fee <b>FRANCHISE TAX</b>		c. Date of notice <b>03/06/2020</b>	
Make your check payable to State Comptroller	Mail to Comptroller of Public Accounts P.O. Box 149348 Austin, TX 78714-9348	d. ■	
e. Taxpayer name and mailing address <b>HIBA ENTERTAINMENT INC. 3020 BIG TOWN BLVD MESQUITE TX 75150-2412</b>		f. Amount Paid \$	

\*TC \*TP \*FP  
 13050 32002130386 19

\*AM \*FILE  
 0 0156693400 4 5



## TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

Comptroller.Texas.Gov

HIBA ENTERTAINMENT INC.  
3020 BIG TOWN BLVD  
MESQUITE TX 75150-2412

Taxpayer number 32002130386	
File number 0156693400	
WebFile number XT602159	
Report year 2020	Due date 05/15/2020

### **Texas Franchise Taxpayers: Your Annual Report Is Due**

Your annual franchise tax report is due on the date shown in the box in the upper right corner of this letter. Even if you have no tax due or no activity to report, Texas tax law requires that you file a franchise tax report and information report each year.

#### **Choose a Reporting Option**

There are three reporting options: No Tax Due Report, E-Z Computation Report and the Long Form report. You will need to choose the best report for your situation.

Taxable entities that are part of a combined group engaged in a unitary business must file a combined group report. A passive entity or a new veteran-owned business cannot be included in a combined group report.

You can file a No Tax Due Report if your business:

- is an entity or a combined group with annualized total revenue less than or equal to the no tax due threshold;
- has zero Texas receipts; or
- meets the statutory requirements for a passive entity, a real estate investment trust or a new veteran-owned business.

You must file an original No Tax Due Report electronically. You can file free through the Comptroller's Webfile system at [www.comptroller.texas.gov/taxes/file-pay/](http://www.comptroller.texas.gov/taxes/file-pay/).

You can file an E-Z Computation Report if your business is an entity or a combined group with annualized total revenue of \$20 million or less.

If you choose this option, your business cannot:

- take any margin deductions (including cost of goods sold or compensation),
- take any franchise tax credits, or
- carry over that report year's temporary credit for business loss carryforward to a future period.

You must file a Long Form report if you:

- are not eligible to file either the No Tax Due Report or the E-Z Computation Report, or
- will take franchise tax credits.

#### **Request an Extension**

A \$50 penalty is due on a report filed after the due date, even if no tax is due. If you need more time to file, request an extension by the due date to avoid the penalty. A combined group must include the Texas Franchise Tax Affiliate List with its first extension request.

#### **Save Time and File Online!**

With the Comptroller's secure online system, Webfile ([www.comptroller.texas.gov/taxes/file-pay/](http://www.comptroller.texas.gov/taxes/file-pay/)), you can file a franchise tax report, pay tax due or request an extension. First-time users will need the Webfile number in the box in the upper right corner of this letter to get started. (Note: Your tax preparer may need your Webfile number to file your report electronically.)

**Hiba Entertainment, Inc**  
**Credit Card Authorization Form**

In order for Hiba Entertainment to accept a credit card as a method of payment for services, the following information must be completed in full and signed by the cardholder.

Authorized User Name Hashina Ahmed  
Billing Address 5400 Preston Oaks Rd  
Unit 4013  
Phone Number 718-433-8838  
Fax Number \_\_\_\_\_  
Email hashinaahmed@hotmail.com

Name Listed on Card Hashina Ahmed  
Credit Card Number 3799  
Expiration Date 07/21  
CVC and Zip Code 770 75254  
Total Due: \$ 525.00

By my signature below, I agree to authorize, and do hereby authorize, Hiba Entertainment, Inc. to charge to the above amount. I understand and agree a 4% credit card processing fees will be added.

**ALL SALES ARE FINAL AND NO REFUND WILL BE ISSUED.**

Cardholder Signature \_\_\_\_\_  
Date 8/3/19

[Signature]

2 Tickets # Floor 2  
SE ROW J-1 & 2

**Hiba Entertainment, Inc**  
**Credit Card Authorization Form**

In order for Hiba Entertainment to accept a credit card as a method of payment for services, the following information must be completed in full and signed by the cardholder.

Authorized User Name

Billing Address

Phone Number

Fax Number

Email

Name Listed on Card

Credit Card Number

Expiration Date

CVC and Zip Code

Total Due:

\$

By my signature below, I agree to authorize, and do hereby authorize, Hiba Entertainment, Inc. to charge to the above amount. I understand and agree a 4% credit card processing fees will be added.

**ALL SALES ARE FINAL AND NO REFUND WILL BE ISSUED.**

Cardholder Signature

Date

05-211  
 (Rev.9-16/23)

# Texas Notice of Intent to Forfeit Right to Transact Business

Date of notice

11/20/2020

Taxpayer name

AZ & HIBA ENTERTAINMENT, INC.

Taxpayer number

32068379711

**Your entity's franchise tax account is not current.** This may result in the forfeiture of the entity's right to transact business in Texas. This information will appear on the Comptroller's public website.

**Problems with the account:**

Complete, Signed Public Information Report, Form 05-102, Not Filed

REPORT YEAR:

2020 ANNUAL



For a detailed explanation of the problems with the account listed above, see "Franchise Tax Notices" at [www.comptroller.texas.gov/taxes/franchise/notices.php](http://www.comptroller.texas.gov/taxes/franchise/notices.php).

Texas law requires the Comptroller to forfeit an entity's right to transact business in Texas if the entity does not file a missing franchise tax report form(s) or pay franchise tax or penalty due within 45 days of the date this notice is mailed. This notice is given in accordance with Texas Tax Code Sections 171.251, 171.2515 and 171.256. These provisions do not apply to banking corporations or savings and loan associations.

If you are a member of a combined group, you may be receiving this notice because the reporting entity for this group has failed to meet the franchise tax requirement shown above. All members of the combined group are subject to forfeiture of their right to transact business in Texas. Please contact the reporting entity to resolve this issue. (Texas Tax Code Section 171.1014)

**If the entity's right to transact business in Texas is forfeited:**

- the entity's status will be shown as "right to transact business forfeited" on the Comptroller's public website at <https://ourcpa.cpa.state.tx.us/coa/>; and
- the entity will be denied the right to sue or defend in a Texas court (except for the right to defend in a suit to terminate the entity's registration with the Texas Secretary of State); and
- each officer, director, partner, member or owner is liable for the debts of the entity (including taxes, penalties and interest) that are created or incurred after the due date of the report and before the privileges are revived. (Texas Tax Code Sections 171.252, 171.253, 171.254 and 171.255)

See the back of this notice for information about electronic reporting, ending the franchise tax responsibility of the entity, collection actions we may take and confirming the account status of the entity.

▼ If you are not required to pay electronically, you can return the bottom portion of this notice with your mailed payment. ▼

05-211  
 (Rev.9-16/23)

VVVV

## Texas Notice of Intent to Forfeit Right to Transact Business

b. ■



Do not write in the space above.

a. Type of tax/fee

FRANCHISE TAX

c. Date of notice

11/20/2020

Make amount payable to  
 State Comptroller

Mail to: Comptroller of Public Accounts  
 P.O. Box 149348  
 Austin, TX 78714-9348

d. ■

e. Taxpayer name and mailing address

AZ & HIBA ENTERTAINMENT, INC.  
 13349 N CENTRAL EXPY  
 DALLAS TX 75243-1103

UD

f. Amount  
 Paid \$

\*TC \*TP \*FP

\*AM

\*FILE


13050 32068379711 20

0

0803117130 2 0

**16.**

**CADENCE BANK 2018  
MORTGAGE INTREST  
STATEMENTS**

<b>TO WHOM PAID</b> <b>CADENCE BANK</b> PO BOX 43467 BIRMINGHAM, AL 35243-0467 Temp-Return Service Requested		DIRECT INQUIRIES TO: 800-636-7622		Recipient's Federal identifying number 64-0156695	2 Outstanding mortgage principal as of 1/1/2018 229,090.08
				Payer's social security number XXX-XX-2222	3 Mortgage origination date 2016-01-07
				1 Mortgage interest received from payer(s)/borrower(s) 12,717.04	4 Refund of overpaid interest
CORRECTED (if checked) <input type="checkbox"/>					
<b>BY WHOM PAID</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>2018</b>                      FORM 1098                 </div> <div style="width: 40%;">  <p>004187-0001 NO BRE</p> <p>004187 0.4450 AB 0.408                      MUHAMMAD NASIR SIDDIQI                      6701 HAVENHURST CT                      ALLEN, TX 75002-3028</p> </div> <div style="width: 20%;"> <p>TR00015</p> </div> </div>					
<b>Mortgage Interest Statement</b> Copy B For Payer/Borrower		8 Address or description of property securing mortgage (see instructions)			
OMB No. 1545-0901 Account number (see instructions) xxxxxxxxxxxxxx8302		10 Other TAXES PAID FROM ESCROW .00		The information in boxes 1 through 9 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a non-deductible item.	
*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.					
9 Number of properties securing the mortgage					

Keep this copy for your records.

[www.irs.gov/form1098](http://www.irs.gov/form1098)

Department of the Treasury - Internal Revenue Service

<b>TO WHOM PAID</b> DIRECT INQUIRIES TO:		Recipient's Federal identifying number		2 Outstanding mortgage principal as of 1/1/2018	
		Payer's social security number		3 Mortgage origination date	
		1 Mortgage interest received from payer(s)/borrower(s)		4 Refund of overpaid interest	
CORRECTED (if checked) <input type="checkbox"/>					
<b>BY WHOM PAID</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>2018</b>                      FORM 1098                 </div> <div style="width: 40%;"> <p>THIS SECTION HAS BEEN LEFT BLANK INTENTIONALLY.</p> </div> <div style="width: 20%;"> </div> </div>					
<b>Mortgage Interest Statement</b> Copy B For Payer/Borrower		8 Address or description of property securing mortgage (see instructions)			
OMB No. 1545-0901 Account number (see instructions)		10 Other		The information in boxes 1 through 9 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a non-deductible item.	
*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.					
9 Number of properties securing the mortgage					

Keep this copy for your records.

[www.irs.gov/form1098](http://www.irs.gov/form1098)

Department of the Treasury - Internal Revenue Service



**17.**

**HIBA 2018 EXPENSES**

	<u>Gas</u>	<u>Car Payment</u>	<u>Car Insurance</u>	<u>Transpo rtation</u>	<u>Parking /Tolls</u>	<u>Travel Expense s</u>	<u>Hotel Expense s</u>	<u>Hotel Fees</u>	<u>Meals</u>	<u>Entertai nment</u>	<u>Groceri es for Custom ers</u>	<u>Telepho ne</u>	<u>Internet</u>	<u>Electric</u>	<u>Rent/V enue</u>	<u>Employ ee</u>	<u>Photogr aphy Fees</u>	<u>Show Fees</u>	<u>Charge Back</u>	<u>Bank Fees</u>	<u>Return ed Checks</u>	<u>Apple iTunes</u>	<u>ATM Withdra wl</u>	<u>Deposit s</u>
January	21.97		74.75						3.95	34.08	46.86	35		30.19		1	1000			35		0.99	500	
	27.86		765.49						3.55	12	41.98						600			35		0.99	100	
	20								25.17		4.32						300							
	14.42								90.05		59.57													
	5.69								80.33															
	4.99																							
	39.99																							
Feburary	17.86				5				37.01		59.92	103.44					1	16250		35				500
	11.92								10.99		105.78						1							1000
	7.77								2.58		6.68					500								4000
	413.75								75.62		55.07													2000
	56.28								7.57		40.44													15000
	9.99								4.22		23.4													18.75
17.3																								
March	64.07	2406.74																200	10000			0.99		2500
	3.59								60.94		226.03													5000
	13.85								40.62															500
	17.86																							8000
April	49.99	2406.74					2032.84	60.98					30.06									0.99		10000
					33	900	475.94	14.27	10.77		51.53											5.4		4500
									11.13													2.15		1000
	37.86								16.76														800	6495
									15.56								1	400						600
																200								5000
May	23.12	2406.74				44.94			3.95		70.83	551.93	30.06			276				25		0.99	200	
	12.58					787.14					15.56	129.46								25		5.4	300	10000
	27.86											216.49										2.15		5000
	39.99										199.86											0.99	800	897
																							600	
June	57.03	2647	2737	95.5		377.98	148.43		69.48	21.99		355.31			905	300	100000			12	5429			1210
	4.56					52	32.71		8.75											35		2.5		1200
	7.18					1100.76			17.02													5.4		5000
	27.87								28.74															1197
	47.32								6.75															560
	58.93								35.96															7000
	37.86																							4500
July	15.59	2647	30.06	6.2		58.04			42.45	79.33	136.6					300	500.4	16200	4000	35		0.99	5000	500
	17.86					29.96				1.45							35	16500	2500	34		5.4		400
	61.94					602.4				130.4									2650	8		2.15		5540
	27.87					602.4													1000	8		0.99		650
	13.14					9.2														60.75				1000

